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| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself  |  |   |
|-----|---|--|---|
|     |   | About Debtor 1:                                    | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name  |  |   |
|     | Write the name that is on your government-issued picture identification (for example, your driver's               | Ewa<br>First name                                  | First name                                    |
|     | license or passport).   | Middle name  | Middle name                                   |
|     | Bring your picture identification to your meeting with the trustee.   | Czochara  Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  | All other names you have used in the last 8 years   |  |   |
|     | Include your married or maiden names.   |  |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-0094  |   |

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Case number (if known)

Debtor 1 Ewa Czochara

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs.  Business name(s)  | ☐ I have not used any business name or EINs.  Business name(s)   |
|    | doing business as names  | business name(s)  | Dusiness name(s)   |
|    |  | EINs  | EINs   |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:  |
|    |  | 1460 Fairlane Drive #518<br>Schaumburg, IL 60193  |  |
|    |  | Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |
|    |  | Cook  |  |
|    |  | County  | County   |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6. | Why you are choosing this district to file for   | Check one:  | Check one:   |
|    | bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|    |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |  |   |  |

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Case number (if known) Debtor 1 Ewa Czochara

| Par | t 2: Tell the Court About   | rour Bai      | nkruptcy Ca | ise                                  |   |   |              |
|-----|---|---------------|-------------|--------------------------------------|---|---|--------------|
| 7.  | The chapter of the Bankruptcy Code you are  |               |             |                                      | of each, see <i>Notice Required by</i> page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Ba<br>e box.  | ankruptcy    |
|     | choosing to file under  | ■ Cha         | apter 7     |                                      |   |   |              |
|     |   | ☐ Cha         | apter 11    |                                      |   |   |              |
|     |   | ☐ Cha         | apter 12    |                                      |   |   |              |
|     |   | ☐ Cha         | apter 13    |                                      |   |   |              |
|     |   |               |             |                                      |   |   |              |
| 8.  | How you will pay the fee  | _<br>_<br>o   | bout how yo | u may pay. Typio<br>attorney is subm | cally, if you are paying the fee yo                                     | with the clerk's office in your local court for rurself, you may pay with cash, cashier's checalf, your attorney may pay with a credit card o | k, or money  |
|     |   |               |             |                                      | <b>Illments.</b> If you choose this optio (Official Form 103A).         | n, sign and attach the Application for Individu   | als to Pay   |
|     |   |               |             |                                      |   | only if you are filing for Chapter 7. By law, a   |              |
|     |   |               |             |                                      |   | ur income is less than 150% of the official poving installments). If you choose this option, you  |              |
|     |   |               |             |                                      |   | ial Form 103B) and file it with your petition.  |              |
|     |   |               |             |                                      |   |   |              |
| 9.  | Have you filed for bankruptcy within the  | ■ No.         |             |                                      |   |   |              |
|     | last 8 years?   | ☐ Yes.        |             |                                      |   |   |              |
|     |   |               | District    |                                      |   |   |              |
|     |   |               | District    |                                      | When  | Case number   |              |
|     |   |               | District    |                                      | When  | Case number   |              |
| 10. | Are any bankruptcy  | ■ No          |             |                                      |   |   |              |
|     | cases pending or being filed by a spouse who is                                       | ☐ Yes.        |             |                                      |   |   |              |
|     | not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? |               |             |                                      |   |   |              |
|     |   |               | Debtor      |                                      |   | Relationship to you   |              |
|     |   |               | District    |                                      | When  | Case number, if known   |              |
|     |   |               | Debtor      |                                      |   | Relationship to you   |              |
|     |   |               | District    |                                      | When  | Case number, if known   |              |
| 11. | Do you rent your  | ■ No.         | Go to       | ine 12.                              |   |   |              |
|     | residence?  | ☐ Yes.        | Has vo      | ur landlord obtai                    | ned an eviction judament agains   | t you and do you want to stay in your residence   | ce?          |
|     |   | <b>□</b> 165. |             | No. Go to line 12                    | , ,   | , ,   | <del>-</del> |
|     |   |               | ت           |                                      |   |   |              |
|     |   |               |             | Yes Fill out Initi                   | ial Statement About an Eviction   | ludgment Against You (Form 101A) and file it  | with this    |

Document Page 4 of 50 Case number (if known) Debtor 1 Ewa Czochara Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety?

Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Ewa Czochara Document Page 5 of 50 Case number (if known)

Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 50 Case number (if known) Debtor 1 Ewa Czochara **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50.000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ewa Czochara Signature of Debtor 2 Ewa Czochara Signature of Debtor 1 Executed on Executed on

January 30, 2017 MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Ewa Czochara Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Michael<br>Signature of | J. Worwag<br>Attorney for Debtor | Date          | January 30, 2017<br>MM / DD / YYYY |
|-----------------------------|----------------------------------|---------------|------------------------------------|
| Michael J. V                | Worwag                           |               |                                    |
| Worwag & Firm name          | Malysz, P.C.                     |               |                                    |
| 2500 E. De<br>Des Plaines   | ,                                |               |                                    |
|                             | City, State & ZIP Code           |               |                                    |
| Contact phone #6256887      |                                  | Email address | mjworwag@gmail.com                 |
| Bar number & St             | ate                              |               |                                    |

|                                 |                          | Docume            | ent Page 8 of 50 | ) |                                      |
|---------------------------------|--------------------------|-------------------|------------------|---|--------------------------------------|
| Fill in this infor              | mation to identify your  | case:             |                  |   |                                      |
| Debtor 1                        | Ewa Czochara First Name  | Middle Name       | Last Name        |   |                                      |
| Debtor 2<br>(Spouse if, filing) | First Name               | Middle Name       | Last Name        |   |                                      |
| United States Ba                | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |   |                                      |
| Case number                     |                          |                   |                  |   | ☐ Check if this is an amended filing |
|                                 |                          |                   |                  |   |                                      |

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| you | original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.  |                     |                         |
|-----|--|---------------------|-------------------------|
| Par | 1: Summarize Your Assets   |                     |                         |
|     |  | Your as<br>Value of | ssets<br>f what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$                  | 0.00                    |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$                  | 2,800.00                |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$                  | 2,800.00                |
| Par | 2: Summarize Your Liabilities  |                     |                         |
|     |  | Your lia<br>Amount  | abilities<br>you owe    |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$                  | 0.00                    |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$                  | 0.00                    |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$                  | 8,592.00                |
|     | Your total liabilities   | \$                  | 8,592.00                |
| Par | 3: Summarize Your Income and Expenses  |                     |                         |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$                  | 653.00                  |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$                  | 640.00                  |
| Par | 4: Answer These Questions for Administrative and Statistical Records   |                     |                         |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other sch        | edules.                 |
| 7.  | Yes What kind of debt do you have?   |                     |                         |
|     |  |                     |                         |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

| \$<br>0.00 |
|------------|
|            |

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

| Fill in this infor  |   | Document  | Page 10 of 50   |   |
|---|---|---|---|---|
| FIII III UIIS IIIIOI  | rmation to identify you   | r case and this filing:   |   |   |
| Debtor 1  | Ewa Czochara  |   |   |   |
|   | First Name  | Middle Name   | Last Name   |   |
| Debtor 2<br>(Spouse, if filing)   | First Name  | Middle Name   | Last Name   |   |
| -   |   |   |   |   |
| United States Ba  | ankruptcy Court for the:  | NORTHERN DISTRICT OF I  | LLINOIS   |   |
| Case number   |   |   |   | ☐ Check if this is an   |
| -   |   |   |   | amended filing  |
|   |   |   |   |   |
| Official Ea   | orm 106A/B  |   |   |   |
|   |   |   |   |   |
| Schedu  | le A/B: Pro <sub>l</sub>  | perty   |   | 12/15   |
| hink it fits best. I<br>nformation. If mo<br>Answer every que   | Be as complete and accur<br>ore space is needed, attac<br>estion.   | rate as possible. If two married pe   | . If an asset fits in more than one category, list the a cople are filing together, both are equally responsible in the top of any additional pages, write your name a u Own or Have an Interest In | e for supplying correct   |
| . Do you own or   | have any legal or equitab   | ble interest in any residence, build  | ling, land, or similar property?  |   |
| ■ No. Go to Pa  | art 2.  |   |   |   |
| ☐ Yes. Where  | is the property?  |   |   |   |
|   |   |   |   |   |
| Part 2: Describe  | e Your Vehicles   |   |   |   |
| B. Cars, vans, to   | rucks, tractors, sport (  | utility vehicles, motorcycles   |   |   |
| ☐ Yes   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
| 4. Watercraft, a  | ,   |   | rehicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories  |   |
| 4. Watercraft, a  | ,   |   | •   |   |
| 1. <b>Watercraft, a</b> <i>Examples:</i> Boo  | ,   |   | •   |   |
| 1. Watercraft, a  Examples: Box   | ,   |   | •   |   |
| 1. Watercraft, a  Examples: Box   | ,   |   | •   |   |
| 4. Watercraft, a  Examples: Bos  ■ No □ Yes  5 Add the doll   | ats, trailers, motors, per  | sonal watercraft, fishing vessels  you own for all of your entric   | es from Part 2, including any entries for   | \$0.00  |
| 4. Watercraft, a  Examples: Bos  ■ No □ Yes  5 Add the doll   | ats, trailers, motors, per  | sonal watercraft, fishing vessels  you own for all of your entric   | s, snowmobiles, motorcycle accessories  | \$0.00  |
| I. Watercraft, a  Examples: Boo  No  Yes  Solution Yes  Add the doll pages you h  | ats, trailers, motors, per<br>lar value of the portion<br>nave attached for Part 2  | sonal watercraft, fishing vessels  you own for all of your entric  Write that number here   | es from Part 2, including any entries for   | \$0.00  |
| 4. Watercraft, a Examples: Boo  ■ No □ Yes  5 Add the doll pages you h  | ats, trailers, motors, per<br>lar value of the portion<br>nave attached for Part 2  | sonal watercraft, fishing vessels  you own for all of your entric  Write that number here   | es from Part 2, including any entries for   |   |
| 1. Watercraft, a Examples: Bos  ■ No □ Yes  5 Add the doll pages you h  Part 3: Describe Do you own or                                | lar value of the portion<br>nave attached for Part 2<br>e Your Personal and Hou<br>have any legal or equ  | sonal watercraft, fishing vessels  you own for all of your entric  Write that number here   | es from Part 2, including any entries for   | \$0.00  Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 4. Watercraft, a  Examples: Bos  No  Yes  5 Add the doll pages you h  Part 3: Describe Do you own or                                  | lar value of the portion<br>have attached for Part :<br>e Your Personal and Hou<br>have any legal or equ  | sonal watercraft, fishing vessels  you own for all of your entric  Write that number here   | es from Part 2, including any entries for   | Current value of the portion you own? Do not deduct secured                               |
| 4. Watercraft, a  Examples: Bos  No  Yes  5 Add the doll pages you h  Part 3: Describe Do you own or  6. Household g  Examples: M     | lar value of the portion<br>have attached for Part 2<br>e Your Personal and Hou<br>have any legal or equ<br>goods and furnishings<br>fajor appliances, furnitur | sonal watercraft, fishing vessels  you own for all of your entrie Write that number here  sehold Items itable interest in any of the fo | es from Part 2, including any entries for   | Current value of the portion you own? Do not deduct secured                               |
| 4. Watercraft, a  Examples: Bos  No  Yes  5 Add the doll pages you h  Part 3: Describe Do you own or  6. Household g  Examples: M  No | lar value of the portion<br>have attached for Part :<br>e Your Personal and Hou<br>have any legal or equ<br>goods and furnishings<br>lajor appliances, furnitur | sonal watercraft, fishing vessels  you own for all of your entrie Write that number here  sehold Items itable interest in any of the fo | es from Part 2, including any entries for   | Current value of the portion you own? Do not deduct secured                               |

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

|                                    | Case 17-02794  | Doc 1          | Filed 01/31/17<br>Document | Entered 01/31/17 16:08:19 Page 11 of 50 Case number (if know) | Desc Main   |
|------------------------------------|--|----------------|----------------------------|---|---|
| Debtor 1                           | Ewa Czochara   |                |                            | Case number (if know.   | 1)  |
|                                    | 77.4.51  |                |                            |   | <b>\$200.00</b>   |
|                                    | TV, Pho  | one            |                            |   | \$300.00  |
| Exampl<br>■ No                     | bles of value les: Antiques and figurines; other collections, memo                                     |                |                            | oks, pictures, or other art objects; stamp, co                | in, or baseball card collections;   |
|                                    |  |                | other hobby equipment;     | bicycles, pool tables, golf clubs, skis; canoe                | s and kayaks; carpentry tools;  |
| ■ No<br>□ Yes.                     | musical instruments  Describe  |                |                            |   |   |
| ■ No                               | ns  oles: Pistols, rifles, shotguns  Describe  | s, ammunitior  | n, and related equipment   | t   |   |
| □ No                               | oles: Everyday clothes, furs   | , leather coat | s, designer wear, shoes,   | accessories   |   |
| ■ Yes.                             | Describe   |                |                            |   |   |
|                                    | Used Po  | ersonal Clo    | thing                      |   | \$800.00  |
| □ No                               | Describe   |                | engagement rings, wed      | ding rings, heirloom jewelry, watches, gems                   |   |
|                                    | Costum   | e Jewelry      |                            |   | \$500.00  |
| Examp ■ No □ Yes.  14. Any ot ■ No | rm animals ples: Dogs, cats, birds, hors Describe her personal and household Give specific information | old items yo   | u did not already list, iı | ncluding any health aids you did not list                     |   |
|                                    | the dollar value of all of your art 3. Write that number he  |                |                            | ny entries for pages you have attached                        | \$2,600.00  |
| Part 4: De                         | scribe Your Financial Assets   |                |                            |   |   |
| Do you ov                          | vn or have any legal or eq   | uitable inter  | est in any of the follow   | ing?  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No                               | oles: Money you have in you  |                |                            | osit box, and on hand when you file your pe                   | ition   |

Case 17-02794 Doc 1 Filed 01/31/17 Entered 01/31/17 16:08:19 Desc Main Page 12 of 50
Case number (if known) Document Debtor 1 Ewa Czochara 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No ■ Yes..... 17.1. Checking Personal Checking account with Oxford Bank \$200.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No  $\hfill \square$  Yes. Give specific information about them...

## 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?

Case 17-02794 Doc 1 Filed 01/31/17 Entered 01/31/17 16:08:19 Desc Main Document Page 13 of 50 . Case number *(if known)* Debtor 1 Ewa Czochara Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$200.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Go to line 38.

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

☐ Yes. Go to line 47.

Page 14 of 50 Case number (if known) Document Debtor 1 Ewa Czochara

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 Part 3: Total personal and household items, line 15 \$2,600.00 57. Part 4: Total financial assets, line 36 \$200.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$2,800.00 Copy personal property total \$2,800.00

Official Form 106A/B page 5 Schedule A/B: Property

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$2,800.00

|                             |   | Document                                |          | Page 15 of 50  |  |
|-----------------------------|---|---|----------|--|--|
| Fill in this informat       | ion to identify your o                            | case:                                   |          |  |  |
| Debtor 1                    | Ewa Czochara                                      |   |          |  | 7  |
| -                           | First Name  | Middle Name                             | La       | ast Name   |  |
| Debtor 2 Spouse if, filing) | First Name  | Middle Name                             | Li       | ast Name   |  |
|                             |   |   |          |  |  |
| nited States Bankr          | uptcy Court for the:                              | NORTHERN DISTRICT OF                    | ILLING   | <u> </u>   |  |
| case number                 |   |   |          |  | ☐ Check if this is an amended filing   |
|                             |   |   |          |  |  |
| Official Forn               | n 106C  |   |          |  |  |
| chedule                     | C: The Pro  | perty You Cla                           | im       | as Exempt  | 4/16   |
|                             |   | ·                                       |          | •  |  |
| e property you liste        | d on Schedule A/B: Platach to this page as n      | roperty (Official Form 106A/B)          | as yo    | ur source, list the property that you                            | or supplying correct information. Using claim as exempt. If more space is additional pages, write your name ar |
| ,                           | ,   |   |          |  | One way of dains as is to state a  |
|                             |   |   |          |  | One way of doing so is to state a<br>sing exempted up to the amount of   |
| ny applicable statu         | ıtory limit. Some exe                             | mptions—such as those for               | healt    | h aids, rights to receive certain b                              | penefits, and tax-exempt retirement  |
|                             |   |   |          | nption of 100% of fair market valuetermined to exceed that amoun | ie under a law that limits the<br>t, your exemption would be limited   |
| the applicable st           |   | and the value of the propert            | .y .c u  | otorminou to oxocou that unioun                                  | t, your exemplion would be immed   |
| art 1: Identify t           | he Property You Clai                              | im as Exempt                            |          |  |  |
| Which set of ex             | emptions are you cla                              | aiming? Check one only, ever            | n if yo  | ur spouse is filing with you.                                    |  |
| _                           |   | nonbankruptcy exemptions.               | -        |  |  |
|                             | _   | ns. 11 U.S.C. § 522(b)(2)               |          | 3 ==(=/(=/   |  |
|                             |   | - , , , ,                               |          | Cill in the information below                                    |  |
|                             |   | -                                       | • •      | fill in the information below.                                   |  |
|                             | of the property and line<br>t lists this property | on Current value of the portion you own | Amo      | Specific laws that allow exemption                               |  |
|                             |   | Copy the value from<br>Schedule A/B     | Che      | ck only one box for each exemption.                              |  |
|                             | ods & Used Furnitu                                | re \$1,000.00                           |          | \$1,000.00   | 735 ILCS 5/12-1001(b)  |
| Line from Scheo             | iule A/B: 6. I                                    |   |          | 100% of fair market value, up to any applicable statutory limit  |  |
| TV, Phone                   |   | \$300.00                                |          | \$300.00   | 735 ILCS 5/12-1001(b)  |
| Line from Scheo             | lule A/B: 7.1                                     | Ψ300.00                                 | _        |  | `,   |
|                             |   |   |          | 100% of fair market value, up to any applicable statutory limit  |  |
| Used Persona                | •   | \$800.00                                |          | 100%   | 735 ILCS 5/12-1001(a)  |
| Line nom sched              | iule AVB. 11.1                                    |   |          | 100% of fair market value, up to any applicable statutory limit  |  |
| Costume Jewe                |   | \$500.00                                |          | \$1.00   | 735 ILCS 5/12-1001(b)  |
| Line from Scheo             | lule A/B: 12.1                                    |   |          | 100% of fair market value, up to                                 |  |
|                             |   |   |          | any applicable statutory limit                                   |  |
|                             |   |   |          |  |  |
|                             |   | nption of more than \$160,375           |          | ed on or after the date of adjustme                              | nt )   |
| ■ No                        | Simeni on 4/01/19 and                             | every 3 years after that for ca         | 1562 111 | ed on or after the date of adjustifie                            | nt.)   |
| 140                         |   |   |          |  |  |
| U Ves Disters               |   | , accorded by the according             | ا منطه   | 215 days before you filed this case                              |  |

Official Form 106C

☐ Yes

Case 17-02794 Doc 1 Filed 01/31/17 Entered 01/31/17 16:08:19 Desc Main Document Page 16 of 50

Debtor 1 Ewa Czochara Case number (if known)

| Fill in this info                       | rmation to identify your | case:             |             |  |
|---|--------------------------|-------------------|-------------|--|
| Debtor 1                                | Ewa Czochara             |                   |             |  |
|   | First Name               | Middle Name       | Last Name   |  |
| Debtor 2                                |                          |                   |             |  |
| (Spouse if, filing)                     | First Name               | Middle Name       | Last Name   |  |
| United States Bankruptcy Court for the: |                          | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number                             |                          |                   |             |  |
| (if known)                              |                          |                   |             |  |
|   |                          |                   |             |  |

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

| Debtor 1   |                  | Ca  | 36 17-02/34   | Document  | Page 18            | R of 50                               | .5 Des        | C Mairi                  |
|--|------------------|---|---|---|--------------------|---------------------------------------|---------------|--------------------------|
| Piret Name   Middle Name   Last Name   | Fill in          | this inform                               | nation to identify your   |   | 1 11000            |                                       |               |                          |
| Pirst Name   | Debto            | or 1                                      | Ewa Czochara  |   |                    |                                       |               |                          |
| United States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS    Case number   Check if this is a amended filing  |                  |   |   | Middle Name   | Last Name          |                                       |               |                          |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number (if horsen)   Check if this is a amended filing  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/1  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other unvested cutory contracts and unespired Leases (Official Form 106Q, Do not include any creditors with partially secured claims. List the other unvested cutory contracts and unespired Leases (Official Form 106Q, Do not include any creditors with partially secured claims tare itsated in eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, with a complete provided that the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, with a complete provided that the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, with a partial page of the page  |                  |   | First Name  | Middle News   | Last Name          |                                       |               |                          |
| Case number   Check if this is a a mended filing   Check if this is a a mended filing    Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims   12/1    Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other any executory contracts and Unexpired Leases (Official Form 1066), Do not include any creditors with partially secured claims that are listed in schedule G: Executory Contracts and Unexpired Leases (Official Form 1066), Do not include any creditors with partially secured claims are listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 1066), Do not include any creditors with partially secured claims are listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 1066).  Form 106 Part 1: List All of Your PRIORITY Unsecured Claims are and case number (if known).  Form 1: List All of Your PRIORITY Unsecured Claims against you?  No. Go to Part 2: List All of Your NONPRIORITY Unsecured Claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your NonPRIORITY Unsecured Claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your NonPRIORITY Unsecured Claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your NonPRIORITY Unsecured Claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your NonPRIORITY Unsecured Claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims, list the other creditors in Part 3. If you have more than three norphority unsecured claims are advantaged to Part 1. If than one creditor holds a particular claim, list the o | (Spous           | e if, filing)                             | First Name  | Middle Name   | Last Name          |                                       |               |                          |
| Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  12/1 3e as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other new executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) Schedule 6: Executory Contracts and Unexpired Leases (Official Form 1066, Do not include any recidiors with priority Secured claims that are listed in Schedule 0: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxe of the Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, writaine and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2: List All of Your NoNPRIORITY Unsecured Claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor share nonpriority unsecured claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims already included in Part 1. If than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims in the other creditors in Part 3.If you have more than three nonpriority unsecured claims in the other creditors in Part 3.If you have more than three nonpriori | Unite            | d States Bar                              | nkruptcy Court for the:   | NORTHERN DISTRICT OF ILI  | LINOIS             |                                       |               |                          |
| Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  12/1 3e as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other new executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) Schedule 6: Executory Contracts and Unexpired Leases (Official Form 1066, Do not include any recidiors with priority Secured claims that are listed in Schedule 0: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxe of the Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, writaine and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2: List All of Your NoNPRIORITY Unsecured Claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor share nonpriority unsecured claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims already included in Part 1. If than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims in the other creditors in Part 3.If you have more than three nonpriority unsecured claims in the other creditors in Part 3.If you have more than three nonpriori | Case             | number                                    |   |   |                    |                                       |               |                          |
| Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  12/1  3a as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other ny executory contracts or unexpired leases (that could result in a claim. Also list executory contracts or chedule Als: Featurity Contracts and Unexpired Leases (Official Form 106A) bo not include any creditors with partially secured claims that are listed in order to the count of  |                  | _   |   |   |                    |                                       | □ C           | heck if this is an       |
| Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other preventions of contracts or unserptived leases that could result in a claim. Also list executory contracts on Schedule AIB: Property (Gifcial Form 106A/B) Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in the claim secured claims with a creditor such page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, writer and and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2: List All of Your NONPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim, if a creditor has more than one nonpriority unsecured daim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1 if the none creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Pagent 2.  A.1 Is all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim, its creditor has more than one nonpriority unsecured claims is the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Pagent 2.  A.1 Is all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim, its creditor separately for each claim. For each claim listed, iden |                  |   |   |   |                    |                                       | aı            | mended filing            |
| Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other way executory contracts or unseptived leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) Schedule 0: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in schedule D: Creditors Who Have Claims Secured by Property, if more space is needed, copy the Part you need, fill to ut, number the entries in the boxe off. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, with a creditor share number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2: List All of Your NonPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim, if a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1 if than one creditor holds a particular claim, list the other creditors in Part 3.if you have more than three nonpriority unsecured claims fill out the Continuation Pagent 2.  A. List all of your nonpriority unsecured claims. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1 if than one creditor holds a particular claim, list the other creditors in Part 3.if you have more than three nonpriority unsecured claims fill out the Continuation Pagent 2.  A | ∩ffic            | sial Form                                 | 106E/E  |   |                    |                                       |               |                          |
| Bas as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other work out and a possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NoNPRIORITY claims. List the other products of which provided bears and another product of the creditor who had seen claims. Second to Schedule Dr. Creditors Who Have Claims Second by Poperty. If more space is needed, copy the Part you need the other than the notice in the boxe etc. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write the call that a page to the page and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2: List All of Your NONPRIORITY Unsecured Claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Part 2: List All of Your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor sparately for each claim. For each claim listed, identify what type of claim it is. Do not list claims aftered yincluded in Part 1. If than one creditor holds a particular claim, list the other creditor's in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page Part 2.  **Capital One Bank Usa**  **A. Last 4 digits of account number**  **International Capital Cone Dr Richmond, VA 23238  **Number Street City State 2 pC code**  Who incurred the debtor 2 only   Contingent   Contin |                  |   |   | /ho Havo Uncocured  | Claime             |                                       |               | 12/15                    |
| any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Executory Contracts and Unexpired Leases (Official Form 106AID). Declaring the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, writer and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims    No. Go to Part 2.   Yes.   |                  |   |   |   |                    | Part 2 for araditors with NONDE       | DIODITY alais |                          |
| 1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.    Ves.   | Sched<br>eft. At | ule D: Credito tach the Cont and case num | ors Who Have Claims Section<br>tinuation Page to this pag<br>to the cif known). | eured by Property. If more space is<br>ge. If you have no information to re | needed, copy t     | he Part you need, fill it out, nu     | mber the ent  | ries in the boxes on the |
| No. Go to Part 2.    Yes.  |                  |   |   |   |                    |                                       |               |                          |
| Yes.   |                  | -   |   | ed claims against you?  |                    |                                       |               |                          |
| List All of Your NONPRIORITY Unsecured Claims against you?   No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.   Yes.   | _                | _   | art 2.  |   |                    |                                       |               |                          |
| 3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Pagerat 2.  Total claim  4.1  |                  |   |   |   |                    |                                       |               |                          |
| No. You have nothing to report in this part. Submit this form to the court with your other schedules.    Yes.  |                  |   |   |   |                    |                                       |               |                          |
| 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page Part 2.    Capital One Bank Usa   | 3. D             | o any credito<br>-                        | rs have nonpriority unsec   | cured claims against you?   |                    |                                       |               |                          |
| 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page Part 2.    Capital One Bank Usa   | L                | No. You hav                               | re nothing to report in this p  | part. Submit this form to the court with                                    | your other sche    | edules.                               |               |                          |
| unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page Part 2.  4.1  |                  | Yes.                                      |   |   |                    |                                       |               |                          |
| A.1 Capital One Bank Usa  Nonpriority Creditor's Name 15000 Capital One Dr Richmond, VA 23238 Number Street City State ZIp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  Last 4 digits of account number 1775  When was the debt incurred? Opened 10/12/13  As of the date you file, the claim is: Check all that apply  Unliquidated Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  | ur<br>th         | nsecured clain<br>an one credito          | n, list the creditor separately   | y for each claim. For each claim listed                                     | l, identify what t | ype of claim it is. Do not list claim | s already inc | uded in Part 1. If more  |
| Nonpriority Creditor's Name 15000 Capital One Dr Richmond, VA 23238 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  When was the debt incurred? Opened 10/12/13  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Touringent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts   |                  |   |   |   |                    |                                       |               | Total claim              |
| 15000 Capital One Dr Richmond, VA 23238  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  When was the debt incurred? Opened 10/12/13  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  | 4.1              | Capital (                                 | One Bank Usa  | Last 4 digits of acc  | ount number        | 1775                                  |               | \$2,195.00               |
| Richmond, VA 23238  Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent  Unliquidated  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts   |                  | , ,                                       |   | When was the debt   | incurred?          | Opened 10/12/13                       |               |                          |
| Who incurred the debt? Check one.  □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ Disputed □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts  |                  |   |   |   |                    |                                       |               |                          |
| ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Contingent □ Unliquidated □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts   |                  |   | , ,   | As of the date you  | file, the claim i  | s: Check all that apply               |               |                          |
| □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts  |                  | _   |   | По и  |                    |                                       |               |                          |
| □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts   |                  | _   | •   | _   |                    |                                       |               |                          |
| □ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts  |                  | _   | ,   | _ ·   |                    |                                       |               |                          |
| ☐ Check if this claim is for a community debt  Is the claim subject to offset?  ■ No  Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts  |                  | _   | •   | T ( NONDDIOD  | NTY unsecured      | l claim:                              |               |                          |
| debt  Is the claim subject to offset?  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  No  Debts to pension or profit-sharing plans, and other similar debts  |                  | _   |   | O(1)C1  |                    |                                       |               |                          |
| Is the claim subject to offset?  report as priority claims  □ Debts to pension or profit-sharing plans, and other similar debts  |                  |   | ii uiis ciaiiii is for a comi   | munity  | ng out of a sepa   | ration agreement or divorce that      | you did not   |                          |
|  |                  | Is the clair                              | m subject to offset?  | report as priority clai   | ms                 | · ·                                   | ,             |                          |
| ☐ Yes ☐ Other. Specify Credit Card   |                  | ■ No                                      |   | ☐ Debts to pension  | or profit-sharin   | g plans, and other similar debts      |               |                          |
|  |                  | ☐ Yes                                     |   | Other. Specify  | Credit Card        |                                       |               |                          |

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| Debt | or i Ewa Czocnara  | Case number (if know)  |            |
|------|--|--|------------|
| 4.2  | Capital One Bank Usa   | Last 4 digits of account number 2607   | \$865.00   |
|      | Nonpriority Creditor's Name 15000 Capital One Dr   | When was the debt incurred? Opened 1/06/10   | _          |
|      | Richmond, VA 23238  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |            |
|      | ■ Debtor 1 only  | ☐ Contingent   |            |
|      | Debtor 2 only  | ☐ Unliquidated   |            |
|      | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |            |
|      | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |            |
|      | ☐ Check if this claim is for a community   | ☐ Student loans  |            |
|      | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims                |            |
|      | No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |            |
|      | Yes  | Other. Specify Credit Card   | _          |
| 4.3  | Citibank   | Last 4 digits of account number 5519   | \$1,030.00 |
|      | Nonpriority Creditor's Name Po Box 6241 Sioux Falls, SD 57117                            | When was the debt incurred? Opened 5/16/13   | _          |
|      | Number Street City State Zlp Code  Who incurred the debt? Check one.                     |  |            |
|      | ■ Debtor 1 only  | ☐ Contingent   |            |
|      | Debtor 2 only  | ☐ Unliquidated   |            |
|      | Debtor 1 and Debtor 2 only   | □ Disputed   |            |
|      | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |            |
|      | ☐ Check if this claim is for a community   | ☐ Student loans  |            |
|      | debt Is the claim subject to offset?   | $\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims        |            |
|      | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |            |
|      | □ Yes  | Other. Specify Credit Card   | _          |
| 4.4  | Citibank na  | Last 4 digits of account number 4678   | \$882.00   |
|      | Nonpriority Creditor's Name 50 Northwest Point Road Elk Grove Village, IL 60007          | When was the debt incurred? Opened 2/14/15   | _          |
|      | Number Street City State Zlp Code  | As of the date you file, the claim is: Check all that apply  |            |
|      | Who incurred the debt? Check one.  |  |            |
|      | ■ Debtor 1 only  | ☐ Contingent   |            |
|      | Debtor 2 only  | ☐ Unliquidated   |            |
|      | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |            |
|      | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |            |
|      | ☐ Check if this claim is for a community   | ☐ Student loans  |            |
|      | debt Is the claim subject to offset?   | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|      | ■ No   | lacktriangle Debts to pension or profit-sharing plans, and other similar debts   |            |
|      | ☐ Yes  | ■ Other. Specify Charge Account  | _          |

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| Debto | r 1 Ewa Czochara  | Case number (if know)   |            |  |  |  |  |  |  |
|-------|---|---|------------|--|--|--|--|--|--|
| 4.5   | Credit One Bank Na  | Last 4 digits of account number 0114  | \$1,331.00 |  |  |  |  |  |  |
|       | Nonpriority Creditor's Name Po Box 98875  | When was the debt incurred? Opened 7/30/13  | _          |  |  |  |  |  |  |
|       | Las Vegas, NV 89193  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |            |  |  |  |  |  |  |
|       | Debtor 1 only   | ☐ Contingent  |            |  |  |  |  |  |  |
|       | Debtor 2 only   | ☐ Unliquidated  |            |  |  |  |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |  |  |  |  |  |  |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |  |  |  |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |            |  |  |  |  |  |  |
|       | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims                   |            |  |  |  |  |  |  |
|       | ■ No  | Debts to pension or profit-sharing plans, and other similar debts   |            |  |  |  |  |  |  |
|       | Yes   | Other. Specify Credit Card  | _          |  |  |  |  |  |  |
| 4.6   | Kohls/Capital One   | Last 4 digits of account number 9709  | \$327.00   |  |  |  |  |  |  |
|       | Nonpriority Creditor's Name<br>N56 W 17000 Ridgewood Dr<br>Menomonee Falls, WI 53051      | When was the debt incurred? 2012  | _          |  |  |  |  |  |  |
|       | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |            |  |  |  |  |  |  |
|       | Who incurred the debt? Check one.   |   |            |  |  |  |  |  |  |
|       | Debtor 1 only   | ☐ Contingent ☐ Unliquidated   |            |  |  |  |  |  |  |
|       | Debtor 2 only   |   |            |  |  |  |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |  |  |  |  |  |  |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |  |  |  |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |            |  |  |  |  |  |  |
|       | debt<br>Is the claim subject to offset?   | $\hfill \square$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |  |  |  |  |
|       | ■ No  | lacktriangle Debts to pension or profit-sharing plans, and other similar debts  |            |  |  |  |  |  |  |
|       | Yes   | ■ Other. Specify Charge Account   | _          |  |  |  |  |  |  |
| 4.7   | Macy dsnb   | Last 4 digits of account number 7520  | \$137.00   |  |  |  |  |  |  |
|       | Nonpriority Creditor's Name<br>9111 Duke Blvd<br>Mason, OH 45040                          | When was the debt incurred? Opened 4/03/12  | _          |  |  |  |  |  |  |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.                      | As of the date you file, the claim is: Check all that apply   |            |  |  |  |  |  |  |
|       | Debtor 1 only   | ☐ Contingent  |            |  |  |  |  |  |  |
|       | Debtor 2 only   | ☐ Unliquidated  |            |  |  |  |  |  |  |
|       | Debtor 1 and Debtor 2 only  | □ Disputed  |            |  |  |  |  |  |  |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |  |  |  |
|       | ☐ Check if this claim is for a community  | ☐ Student loans   |            |  |  |  |  |  |  |
|       | debt Is the claim subject to offset?  | $\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims    |            |  |  |  |  |  |  |
|       | No  | lacksquare Debts to pension or profit-sharing plans, and other similar debts  |            |  |  |  |  |  |  |
|       | Yes   | _   |            |  |  |  |  |  |  |

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| 4.8     | Nordstrom Fsb  | Last 4 digits of account number                              | 5151  | \$736.00 |
|---------|--|--|---|----------|
|         | Nonpriority Creditor's Name<br>Po Box 6555   | When was the debt incurred?                                  | Opened 4/12/12                                |          |
|         | Englewood, CO 80155  | _  |   |          |
|         | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim                           | is: Check all that apply                      |          |
|         | _  | П.   |   |          |
|         | Debtor 1 only  | Contingent   |   |          |
|         | Debtor 2 only  | Unliquidated   |   |          |
|         | Debtor 1 and Debtor 2 only   | ☐ Disputed   | Lateta  |          |
|         | At least one of the debtors and another  | Type of NONPRIORITY unsecured  ☐ Student loans               | d claim:                                      |          |
|         | ☐ Check if this claim is for a community debt  | _  |   |          |
|         | Is the claim subject to offset?  | report as priority claims                                    | ration agreement or divorce that you did not  |          |
|         | ■ No   | ☐ Debts to pension or profit-sharin                          | g plans, and other similar debts              |          |
|         | Yes  | Other. Specify Charge Acc                                    | ount  |          |
| 4.9     | Syncb/Care Credit  | Last 4 digits of account number                              | 6416  | \$424.00 |
|         | Nonpriority Creditor's Name  | -  |   | ΨτΣτ.00  |
|         | 950 Forrer Blvd<br>Kettering, OH 45420   | When was the debt incurred?                                  | Opened 11/11/12                               |          |
| -       | Number Street City State Zlp Code  | As of the date you file, the claim                           | is: Check all that apply                      |          |
|         | Who incurred the debt? Check one.  |  |   |          |
|         | ■ Debtor 1 only  | ☐ Contingent   |   |          |
|         | Debtor 2 only  | ☐ Unliquidated   |   |          |
|         | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |          |
|         | ☐ At least one of the debtors and another  | d claim:   |   |          |
|         | ☐ Check if this claim is for a community   |  |   |          |
|         | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not  |          |
|         | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts              |          |
|         | Yes  | Other Specify Charge Acc                                     | ount  |          |
| 4.1     | Syncb/Tj Maxx  | Last 4 digits of account number                              | 0008  | \$665.00 |
| 0       | Nonpriority Creditor's Name  | Last 4 digits of account number                              |   | φοσο.σσ  |
|         | Po Box 965005  | When was the debt incurred?                                  | Opened 11/14/12                               |          |
| -       | Orlando, FL 32896  Number Street City State Zlp Code   | As of the date you file, the claim                           | is: Check all that apply                      |          |
|         | Who incurred the debt? Check one.  | ,  | ,       |          |
|         | ■ Debtor 1 only  | ☐ Contingent   |   |          |
|         | ☐ Debtor 2 only  | ☐ Unliquidated   |   |          |
|         | Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |          |
|         | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure                                 | d claim:                                      |          |
|         | ☐ Check if this claim is for a community   | ☐ Student loans  |   |          |
|         | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |          |
|         | ■ No   | ☐ Debts to pension or profit-sharin                          | g plans, and other similar debts              |          |
|         | Yes  | ount   |   |          |
| D       | - United the second of the sec | 4 That Van Al  |   |          |
| Part 3: | List Others to Be Notified About a Deb   | t Inat You Already Listed                                    |   |          |

notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1 Ewa Czochara

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Total Claim    |
|--------------|-----|---|-----|----------------|
|              | 6a. | Domestic support obligations  | 6a. | \$<br>0.00     |
| Total claims |     |   |     |                |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00     |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00     |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00     |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00     |
|              |     |   |     | Total Claim    |
|              | 6f. | Student loans   | 6f. | \$<br>0.00     |
| Total claims |     |   |     |                |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00     |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00     |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>8,592.00 |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$<br>8,592.00 |

|   |                         | DOCUME            | ni Paue 23 0150 |                                      |
|---|-------------------------|-------------------|-----------------|--------------------------------------|
| Fill in this infor                      | mation to identify your | case:             |                 |                                      |
| Debtor 1                                | Ewa Czochara            |                   |                 |                                      |
|   | First Name              | Middle Name       | Last Name       |                                      |
| Debtor 2                                |                         |                   |                 |                                      |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name       |                                      |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS     |                                      |
| Case number                             |                         |                   |                 |                                      |
| (if known)                              |                         |                   |                 | ☐ Check if this is an amended filing |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company wit | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------|---|-------------------|---|
| 2.1 |           |             |   |                   |   |
|     | Name      |             |   |                   | _                                       |
|     | Number    | Street      |   |                   | _                                       |
|     | City      |             | State   | ZIP Code          |   |
| 2.2 |           |             |   |                   |   |
|     | Name      |             |   |                   |   |
|     | Number    | Street      |   |                   | _                                       |
|     | City      |             | State   | ZIP Code          |   |
| 2.3 |           |             |   |                   |   |
|     | Name      |             |   |                   | _                                       |
|     | Number    | Street      |   |                   |   |
|     | City      |             | State   | ZIP Code          | <del>_</del>                            |
| 2.4 |           |             |   |                   |   |
|     | Name      |             |   |                   | _                                       |
|     | Number    | Street      |   |                   |   |
|     | City      |             | State   | ZIP Code          |   |
| 2.5 |           |             |   |                   |   |
|     | Name      |             |   |                   | _                                       |
|     | Number    | Street      |   |                   | _                                       |
|     | City      |             | State   | ZIP Code          |   |
|     |           |             |   |                   |   |

|                                |  | Docume                    | ent Page 24 d          | )T 5()                                    |   |
|--------------------------------|--|---------------------------|------------------------|---|---|
| Fill in this i                 | nformation to identify your  |                           |                        |   |   |
| Debtor 1                       | Ewa Czochara   |                           |                        |   |   |
|                                | First Name   | Middle Name               | Last Name              |   |   |
| Debtor 2<br>(Spouse if, filing | ) First Name   | Middle Name               | Last Name              |   |   |
| United State                   | es Bankruptcy Court for the:   | NORTHERN DISTRICT         | OF ILLINOIS            |   |   |
| Office Otate                   | be Burnardpiey Court for the.  | 101111211112111101        | 0. 122                 |   |   |
| Case number (if known)         | er   |                           |                        |   | ☐ Check if this is an   |
|                                |  |                           |                        |   | amended filing  |
| Official                       | Form 10011   |                           |                        |   |   |
|                                | Form 106H  | -1-1                      |                        |   |   |
| Schedu                         | ule H: Your Cod  | ebtors                    |                        |   | 12/15   |
| Arizona                        | in the last 8 years, have you,<br>, California, Idaho, Louisiana,<br>Go to line 3.<br>Did your spouse, former spou | , Nevada, New Mexico, Pu  | erto Rico, Texas, Wash |   | states and territories include  |
| in line 2                      | 2 again as a codebtor only i<br>06D), Schedule E/F (Official   | f that person is a guaran | tor or cosigner. Make  | sure you have listed the                  | with you. List the person shown<br>creditor on Schedule D (Official<br>chedule E/F, or Schedule G to fill |
|                                | olumn 1: Your codebtor<br>ame, Number, Street, City, State and Z   | IP Code                   |                        | Column 2: The cred<br>Check all schedules | itor to whom you owe the debt that apply:   |
| 3.1                            |  |                           |                        | ☐ Schedule D, line                        |   |
|                                | ame  |                           |                        | ☐ Schedule E/F, line                      | ·   |
|                                |  |                           |                        | ☐ Schedule G, line                        |   |
|                                | umber Street   | Otata                     | 7ID 0 - 4 -            | _   |   |
| Ci                             | ity  | State                     | ZIP Code               |   |   |
| 3.2                            |  |                           |                        | ☐ Schedule D, line                        |   |
|                                | ame  |                           |                        | Schedule E/F, line                        |   |
|                                |  |                           |                        | ☐ Schedule G, line                        | <del>-</del>  |
| N                              | umber Street   |                           |                        | _   |   |
|                                | ity  | State                     | ZIP Code               |   |   |

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| Fill     | in this information to identify your c  | ase:                       |   |             |       |                      |   |                            |          |
|----------|---|----------------------------|---|-------------|-------|----------------------|---|----------------------------|----------|
| Del      | btor 1 Ewa Czocha   | ra                         |   |             | _     |                      |   |                            |          |
|          | btor 2  |                            |   |             | _     |                      |   |                            |          |
| Uni      | ited States Bankruptcy Court for the  | : NORTHERN DISTRIC         | CT OF ILLINOIS                                      |             | _     |                      |   |                            |          |
|          | se number   |                            | -   |             |       | Check if this in     |   |                            |          |
|          |   |                            |   |             |       | A supplen            |   | postpetition llowing date: | chapter  |
| <u>O</u> | fficial Form 106I   |                            |   |             |       | MM / DD/             | YYYY  |                            |          |
| S        | chedule I: Your Inc   | ome                        |   |             |       |                      |   |                            | 12/15    |
| atta     | use. If you are separated and you ch a separate sheet to this form.  It 1: Describe Employment  Fill in your employment |                            |   |             |       | case number (i       |   | nswer every                |          |
|          | information.  |                            |   |             |       |                      |   | ing spouse                 |          |
|          | If you have more than one job, attach a separate page with information about additional                                 | Employment status          | <ul><li>■ Employed</li><li>□ Not employed</li></ul> | _           |       |                      | <ul><li>■ Employed</li><li>□ Not employed</li></ul> |                            |          |
|          | employers.  | Occupation                 |   |             |       |                      |   |                            |          |
|          | Include part-time, seasonal, or self-employed work.   | Employer's name            |   |             |       |                      |   |                            |          |
|          | Occupation may include student or homemaker, if it applies.   | Employer's address         |   |             |       |                      |   |                            |          |
|          |   | How long employed t        | here?   |             |       |                      |   |                            |          |
| Pai      | Give Details About Mor  | nthly Income               |   |             |       |                      |   |                            |          |
|          | mate monthly income as of the duse unless you are separated.  | ate you file this form. If | you have nothing to r                               | eport for   | any l | ine, write \$0 in th | e space. Incl                                       | ude your nor               | n-filing |
|          | ou or your non-filing spouse have mo<br>e space, attach a separate sheet to   |                            | ombine the informatio                               | n for all e | emplo | oyers for that pers  | on on the lin                                       | es below. If y             | ou need  |
|          |   |                            |   |             |       | For Debtor 1         | For Deb<br>non-filin                                | tor 2 or<br>ng spouse      |          |
| 2.       | List monthly gross wages, sala deductions). If not paid monthly,  |                            |   | 2.          | \$    | 0.00                 | \$  | 0.00                       |          |
| 3.       | Estimate and list monthly overt   | ime pay.                   |   | 3.          | +\$   | 0.00                 | +\$   | 0.00                       |          |
| 4.       | Calculate gross Income. Add lin   | ne 2 + line 3.             |   | 4.          | \$    | 0.00                 | \$  | 0.00                       |          |

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| Deb | tor 1          | Ewa Czochara   | _          | Ca  | se number ( <i>if kno</i> | wn)      |               |                         |                 |        |
|-----|----------------|--|------------|-----|---------------------------|----------|---------------|-------------------------|-----------------|--------|
|     |                |  |            |     |                           |          |               | <b>-</b>                |                 |        |
|     |                |  |            | F   | or Debtor 1               |          |               | Debtor 2<br>n-filing sp |                 |        |
|     | Copy           | y line 4 here  | 4.         | \$  | 0.                        | 00       | \$            | 3 1                     | 0.00            |        |
| 5.  | List           | all payroll deductions:  |            |     |                           |          |               |                         |                 |        |
|     | 5a.            | Tax, Medicare, and Social Security deductions  | 5a.        | \$  | 0.                        | 00       | \$            |                         | 0.00            |        |
|     | 5b.            | Mandatory contributions for retirement plans   | 5b.        | \$  |                           | 00       | \$            |                         | 0.00            |        |
|     | 5c.            | Voluntary contributions for retirement plans   | 5c.        | \$  | 0.                        | 00       | \$            |                         | 0.00            |        |
|     | 5d.            | Required repayments of retirement fund loans   | 5d.        | \$  | 0.                        | 00       | \$            |                         | 0.00            |        |
|     | 5e.            | Insurance  | 5e.        |     |                           | 00       | \$_           |                         | 0.00            |        |
|     | 5f.            | Domestic support obligations   | 5f.        | \$  |                           | 00       | \$_           |                         | 0.00            |        |
|     | 5g.<br>5h.     | Union dues Other deductions. Specify:  | 5g.<br>5h. |     |                           | 00       | , <b>\$</b> _ |                         | 0.00            |        |
| •   |                | · · · · · · · · · · · · · · · · · · ·  | _          |     |                           |          | _             |                         | 0.00            |        |
| 6.  |                | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.         | \$  |                           | 00       | \$_           |                         | 0.00            |        |
| 7.  | Calc           | ulate total monthly take-home pay. Subtract line 6 from line 4.  | 7.         | \$  | 0.                        | 00       | \$_           |                         | 0.00            |        |
| 8.  | List a         | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross  |            |     |                           |          |               |                         |                 |        |
|     |                | receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a.        | \$  | 0                         | 00       | \$            |                         | 0.00            |        |
|     | 8b.            | Interest and dividends   | 8b.        |     |                           | 00       | \$-           |                         | 0.00            |        |
|     | 8c.            | Family support payments that you, a non-filing spouse, or a dependent regularly receive  |            | •   |                           | <u> </u> | Ť-            |                         | 0.00            |        |
|     |                | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 8c.        |     |                           | 00       | \$_           |                         | 0.00            |        |
|     | 8d.            | Unemployment compensation  | 8d.        |     |                           | 00       | \$_           |                         | 0.00            |        |
|     | 8e.            | Social Security  | 8e.        | \$  | 0.                        | 00       | \$_           |                         | 653.00          |        |
|     | 8f.            | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e<br>8f.   | \$  | 0                         | 00       | \$            |                         | 0.00            |        |
|     | 8g.            | Pension or retirement income   | — 8g.      |     |                           | 00       | \$_           |                         | 0.00            |        |
|     | 8h.            | Other monthly income. Specify:   | 8h.        |     |                           | 00       |               |                         | 0.00            |        |
|     |                |  |            |     |                           |          | _             |                         |                 | Ī      |
| 9.  | Add            | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.         | \$_ | 0.                        | 00       | \$_           |                         | 653.00          | i      |
| 10. | Calc           | ulate monthly income. Add line 7 + line 9.   | 10.        | 5   | 0.00                      | + \$     |               | 653.00                  | = \$            | 653.00 |
|     | Add            | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   |            |     |                           |          |               |                         |                 |        |
| 11. | Inclu<br>other | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not cify:    | deper      |     | , ,                       |          | •             | S <i>chedule</i><br>11. |                 | 0.00   |
| 12. |                | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certales  |            |     |                           |          |               | 12.                     | \$              | 653.00 |
|     |                |  |            |     |                           |          |               |                         | Combine monthly |        |
| 13. | Do y           | ou expect an increase or decrease within the year after you file this form   | ?          |     |                           |          |               |                         |                 |        |
|     |                | No.  |            |     |                           |          |               |                         |                 |        |
|     | П              | Yes Explain:   |            |     |                           |          |               |                         |                 | 1      |

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| Fills | n this informa                                | tion to identify yo                                    | nr case.               |  |   | 1  |  |  |  |  |
|-------|---|--|------------------------|--|---|--|--|--|--|--|
| Debt  |   |  |                        |  |   | Charle                                     | if this is:                            |  |  |  |
| Debi  | IOI I   | Ewa Czochara   | a                      |  |   | Check if this is:  An amended filing       |  |  |  |  |
| Debt  |   |  |                        |  |   | ☐ A supplement showing postpetition chapte |  |  |  |  |
| ` .   | ouse, if filing)                              |  |                        |  |   | 13 expenses as of the following date:      |  |  |  |  |
| Unite | ed States Bankr                               | uptcy Court for the:                                   | NORTH                  | IERN DISTRICT OF ILLIN   | IOIS  | N  | IM / DD / YYYY                         |  |  |  |
|       | e number<br>nown)                             |  |                        |  |   |  |  |  |  |  |
| Of    | ficial Fo                                     | rm 106J  |                        |  |   |  |  |  |  |  |
| Sc    | chedule                                       | J: Your I  | Exper                  | ises   |   |  |  | 12/1                                       |  |  |
| info  | rmation. If m                                 | and accurate as<br>ore space is nee<br>n). Answer ever | eded, atta             | . If two married people and the control of the cont | re filing together, be<br>form. On the top of | oth are equal<br>any addition              | ly responsible fo<br>al pages, write y | or supplying correct<br>rour name and case |  |  |
| Part  | 1: Descr<br>Is this a joir                    | ibe Your House   | hold                   |  |   |  |  |  |  |  |
| ١.    | No. Go to                                     |  |                        |  |   |  |  |  |  |  |
|       |   | s Debtor 2 live i                                      | n a separ              | ate household?   |   |  |  |  |  |  |
|       | □N  | 0  | -                      |  |   |  |  |  |  |  |
|       | □ Y   | es. Debtor 2 mus                                       | t file Offici          | al Form 106J-2, Expenses   | s for Separate House                          | ehold of Debto                             | r 2.                                   |  |  |  |
| 2.    | Do you have                                   | e dependents?  | ■ No                   |  |   |  |  |  |  |  |
|       | Do not list Debtor 2.                         | ebtor 1 and  | ☐ Yes.                 | Fill out this information for each dependent   | Dependent's relati                            |  | Dependent's age                        | Does dependent live with you?              |  |  |
|       | Do not state                                  |  |                        |  |   |  |  | □ No                                       |  |  |
|       | dependents                                    | names.   |                        |  |   |  |  | ☐ Yes<br>☐ No                              |  |  |
|       |   |  |                        |  |   |  |  | ☐ Yes                                      |  |  |
|       |   |  |                        |  |   |  |  | □ No                                       |  |  |
|       |   |  |                        |  |   |  |  | ☐ Yes                                      |  |  |
|       |   |  |                        |  |   |  |  | □ No<br>□ Yes                              |  |  |
| 3.    |   | enses include  |                        | No   |   |  |  | □ 162                                      |  |  |
|       | •   | f people other the<br>d your depender                  | nan $_{\square}$       | Yes  |   |  |  |  |  |  |
| exp   | imate your ex                                 |  | our bankrı             | y Expenses<br>uptcy filing date unless y<br>y is filed. If this is a supp  |   |  |  |  |  |  |
| the   | ude expense<br>value of such<br>icial Form 10 | n assistance and                                       | non-cash<br>d have inc | government assistance is luded it on <i>Schedule I:</i> Y  | if you know<br>Your Income                    |  | Your expe                              | enses                                      |  |  |
| ,     |   | - <b>,</b>   |                        |  |   |  |  |  |  |  |
| 4.    |   | or home owners!<br>and any rent for the                |                        | ses for your residence. I<br>or lot.   | Include first mortgage                        | e<br>4. \$                                 |  | 0.00                                       |  |  |
|       | If not includ                                 | led in line 4:   |                        |  |   |  |  |  |  |  |
|       | 4a. Real e                                    | estate taxes   |                        |  |   | 4a. \$                                     |  | 0.00                                       |  |  |
|       | •   | rty, homeowner's                                       |                        |  |   | 4b. \$                                     |  | 0.00                                       |  |  |
|       |   |  |                        | upkeep expenses  |   | 4c. \$                                     |  | 0.00                                       |  |  |
| 5.    |   | owner's associati<br>nortgage payme                    |                        | dominium dues<br>o <b>ur residence,</b> such as ho   | me equity loans                               | 4d. \$<br>5. \$                            |  | 0.00                                       |  |  |

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| 6b. Water, sewer, garbage collection   6c. Telephone, ell phone, Internet, satellite, and cable services   6c. \$   100.0   6c. Telephone, cell phone, Internet, satellite, and cable services   6c. \$   100.0   6c. Telephone, cell phone, Internet, satellite, and cable services   6c. \$   0.0   7. Food and housekeeping supplies   7. \$   350.0   7. Food and housekeeping supplies   7. \$   350.0   8. \$   0.0   9. Clothing, laundry, and dry cleaning   9. \$   60.0   9. Clothing, laundry, and dry cleaning   9. \$   60.0   10. Personal care products and services   10. \$   50.0   10. Medical and dental expenses   11. \$   20.0   12. Transportation. Include gas, maintenance, bus or train fare.   20.0   12. Transportation. Include gas, maintenance, bus or train fare.   20.0   13. Entertainment, clubs, recreation, newspapers, magazines, and books   13. \$   10.1   14. Charitable contributions and religious donations   14. \$   0.0   15. Insurance.   50.0   15. Insurance.   50.0   15. Health insurance deducted from your pay or included in lines 4 or 20.   15a. \$   0.0   15b. Health insurance   15b. \$   0.0   15c. Vehicle insurance   15b. \$   0.0   15c. Vehicle insurance   15c. \$   0.0   15c. Vehicle insura |              |
|---|--------------|
| 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, cell phone, Internet; satellite, and cable services 6c. 1001 6c. Telephone, call phone, Internet; satellite, and cable services 6c. 1001 6c. Charles, services 6c. 1001 6c. Telephone, call phone, services 6c. 1001 6c.                                     |              |
| 6b. Water, sever, garbage collection   6c. Telephone, cell phone, intermet, satellite, and cable services   6c. S   1001   6c. Telephone, cell phone, intermet, satellite, and cable services   6c. S   0.01   6c. Telephone, cell phone, intermet, satellite, and cable services   6c. S   0.01   6c. Telephone, cell phone, intermet, satellite, and cable services   6c. S   0.01   6c. Telephone, cell phone, intermet, satellite, and cable services   6c. S   0.01   6c. Telephone, cell phone, intermet, satellite, and cable services   7c. S   3500.   | 0.00         |
| Co.   Telephone, cell phone, Internet, satellite, and cable services   6c.   100.   | 0.00         |
| 6d. Other. Specify:  6d. Other. Specify:  6d. Other. Specify:  7. \$ 350.0  3. Clothing, laundry, and dry cleaning  8. \$ 0.0  9. \$ 60.0  60.0  10. Personal care products and services  10. \$ 50.0  11. Medical and dental expenses  11. \$ 20.0  12. Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. \$ 0.0  15. Leather insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. \$ 0.0  15c. Vehicle insurance  15c. \$ 0.0  15d. Other insurance.  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. Other insurance. Specify:  17d. Car payments for Vehicle 1  17c. Car payments for Vehicle 2  17c. Other. Specify:  17d. Car payments for Vehicle 2  17d. Cherrispecify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other payments or vehicle 2  17d. Specify:  17d. Other payments for Vehicle 1  17d. Specify:  17d. Other. Specify:  17d. Other specify:  17d. Specify:  17d. Other specify:  17d. Specify:  17d. Other specify:  17d. Other specify:  17d. Other specify:  17d. Other specify:  17d. Specify:  1                            |              |
| Food and housekeeping supplies  |              |
| Childcare and children's education costs  | 0.00         |
| Clothing, laundry, and dry cleaning   |              |
| 10.   Personal care products and services   10.   \$   50.0   | 0.00         |
| 1.   Medical and dental expenses   11.   \$   20.0  | 60.00        |
| 2. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Do not include car payments. 3. Entertainment, clubs, recreation, newspapers, magazines, and books 3. Entertainment, clubs, recreation, newspapers, magazines, and books 4. Charitable contributions and religious donations 5. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15b. Leath insurance 15c. Vehicle insurance. 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16d. \$ 0.0.0 15d. Other insurance. Specify: 16d. \$ 0.0.0 15d. Other insurance. Specify: 16d. \$ 0.0.0 15d. Other insurance. Specify: 17d. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106I). 18 Our payments of alimony, maintenance, and support that you did not report as deducted from you pay on line 5, Schedule 1, Your Income (Official Form 106I). 18 Outher payments you make to support others who do not live with you. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0.0 20c. Property, homeowner's association or condominium dues 20c. \$ 0.0.0 20c. Property, homeowner's association or condominium dues 20c. \$ 0.0.0 20c. Property, homeowner's association or condominium dues 20c. \$ 0.0.0 20c. Property, homeowner's association or condominium dues 20c. \$ 0.0.0 20c. Property, homeowner's association or condominium dues 20c. \$ 0.0.0 20c. Property, homeowner's association or condominium dues 20c. \$ 0.0.0 20c. Property, homeowner's as                        | 50.00        |
| Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15c. Vehicle insurance.  15c. Vehicle insurance.  15d. Other insurance.  15d. S  | 20.00        |
| Sentertainment, clubs, recreation, newspapers, magazines, and books   13. \$   10.0   | 50.00        |
| Charitable contributions and religious donations   14. \$   0.0   |              |
| Insurance   | 10.00        |
| Do not include insurance deducted from your pay or included in lines 4 or 20.   | 0.00         |
| 15a. Life insurance         15b. Health insurance         15b. \$         0.0           15b. Health insurance         15c. Vehicle insurance         15c. \$         0.0           15c. Vehicle insurance. Specify:         15d. \$         0.0           6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         Specify:         16. \$         0.0           7. Installment or lease payments:         17a. Car payments for Vehicle 1         17a. \$         0.0           17b. Carp payments for Vehicle 2         17b. \$         0.0           17c. Other. Specify:         17c. \$         0.0           17d. Other. Specify:         17c. \$         0.0           17d. Other. Specify:         17d. \$         0.0           17d. Other. Specify:         17d. \$         0.0           18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).         18. \$         0.0           9. Other payments you make to support others who do not live with you.         \$         0.0           9. Other payments you make to support others who do not live with you.         \$         0.0           Specify:         19.         0.0           0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.         20c.  |              |
| 15b. Health insurance   | 0.00         |
| 15c. Vehicle insurance   15c. \$ 0.0.0  | 0.00         |
| 15d. Other insurance. Specify:  15axes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  15axes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  15axes. Do not include taxes deducted from your pay or included in lines 4 or 20.  15bx Car payments for Vehicle 1  17a. \$ 0.0  17b. \$ 0.0  17c. \$ 0.0  17c. \$ 0.0  17c. \$ 0.0  17c. \$ 0.0  17d. \$ 0.0  17d. \$ 0.0  18. \$ 0.0  19. Other, Specify: 17d. \$ 0.0  18. \$ 0.0  19. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l).  19. Other payments you make to support others who do not live with you.  19. Other payments you make to support others who do not live with you.  20a. Mortgages on other property 20a. S 0.0  20a. Mortgages on other property 20a. \$ 0.0  20b. Real estate taxes 20b. \$ 0.0  20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0  20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0  20e. Homeowner's association or condominium dues 20e. \$ 0.0  20c. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.6   | 0.00         |
| 5. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  7. Installment or lease payments:  17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). 9. Other payments you make to support others who do not live with you. Specify: 19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20c. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. \$ 0.0  20c. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.6  | 0.00         |
| Specify:  | 0.00         |
| 7. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 17d. Other specify: 17d. Other specify: 17d. S 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.   |              |
| 17a. Car payments for Vehicle 1       17a. \$       0.0         17b. Car payments for Vehicle 2       17b. \$       0.0         17c. Other. Specify:       17c. \$       0.0         17d. Other. Specify:       17d. \$       0.0         8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18. \$       0.0         9. Other payments you make to support others who do not live with you.       \$       0.0         Specify:       19.       0.0         0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$       0.0         20a. Mortgages on other property       20a. \$       0.0       0.0         20b. Real estate taxes       20b. \$       0.0       0.0         20c. Property, homeowner's, or renter's insurance       20c. \$       0.0       0.0         20d. Maintenance, repair, and upkeep expenses       20d. \$       0.0       0.0         20e. Homeowner's association or condominium dues       20e. \$       0.0       0.0         2. Calculate your monthly expenses       22a. Add lines 4 through 21.       \$       640.00         22c. Add line 22a and 22b. The result is your monthly expenses.       \$       640.00         3. Calculate   | 0.00         |
| 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  9. Other payments you make to support others who do not live with you.  Specify: 19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a. Specify: 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Specify: 20d. Maintenance, repair, and upkeep expenses 20d. Specify: 21c. Other: Specify: 22c. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Specify: 25b. Copy line 12 (your combined monthly income) from Schedule I. 23a. Specify: 25c. Copy line 12 (your combined monthly income) from Schedule I. 23a. Specify: 25c. Copy line 12 (your combined monthly income) from Schedule I. 23a. Specify: 25c. Copy line 12 (your combined monthly income) from Schedule I. 23a. Specify: 25c. Copy line 12 (your combined monthly income) from Schedule I. 23a. Specify: 25c. Copy line 12 (your combined monthly income) from Schedule I. 25c. Copy line 12 (your combined monthly income) from Schedule I. 25c. Copy line 12 (your combined monthly income) from Schedule I.  |              |
| 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Specify: 18deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). 18deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). 18deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). 19deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). 19deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). 19deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). 19deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). 19deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106l). 19deducted from your pay on line 2, Schedule 1, Your Income (Official Form 106l). 19deducted from your pay on line 2, Schedule 1, Your Income (Official Form 106l). 19deducted from your pay on line 2, Schedule 1, Your Income (Official Form 106l). 19deducted from your pay on line 2, Schedule 1, Your Income (Official Form 106l). 19deducted from your pay on line 2, Schedule 1, Your Income (Official Form 106l). 19deducted from your Income (Official Form 106l)                                    | 0.00         |
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| 17d. Other. Specify:  17d. Syour payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. Syocify:  19. Other payments you make to support others who do not live with you.  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a. Syocify:  20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.6   | 0.00         |
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| 9. Other payments you make to support others who do not live with you.  Specify: 19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a. \$ 0.0  20b. Real estate taxes 20b. \$ 0.0  20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0  20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0  20e. Homeowner's association or condominium dues 20e. \$ 0.0  1. Other: Specify: 21. +\$ 0.0  2. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. \$ 640.00  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.0  | 0.00         |
| Specify: 19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a. \$ 0.0  20b. Real estate taxes 20b. \$ 0.0  20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0  20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0  20e. Homeowner's association or condominium dues 20e. \$ 0.0  1. Other: Specify: 21. +\$ 0.0  2. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. \$ 640.00  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.6  | 0.00         |
| 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. Secretary 20e. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.6  |              |
| 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. Security: 21. +\$ 0.6  22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.6  |              |
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| 20e. Homeowner's association or condominium dues  20e. \$ 0.0 0.0 0.0 0.0 1. Other: Specify:  21. +\$ 0.0 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.0  | 0.00         |
| 1. Other: Specify:  2. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.6   | 0.00         |
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| 22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  3. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. \$ 653.6  | 0.00         |
| 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.6   |              |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.6   | 40.00        |
| 22c. Add line 22a and 22b. The result is your monthly expenses.  \$ 640.00  3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.0   |              |
| 3. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.0   | 40.00        |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.0   | 40.00        |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 653.0   |              |
|   | 653.00       |
|   | 640.00       |
|   |              |
| 23c. Subtract your monthly expenses from your monthly income.   |              |
| The result is your monthly net income.  | 13.00        |
|   |              |
| 24. Do you expect an increase or decrease in your expenses within the year after you file this form?  |              |
| For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease becaus   | because of a |
| modification to the terms of your mortgage?   |              |
| ■ No.   |              |
| Yes. Explain here:  |              |

## Case 17-02794 Doc 1 Filed 01/31/17 Entered 01/31/17 16:08:19 Desc Main Document Page 29 of 50

| Fill in this info   | rmation to identify your                             | case:                    |                            |                           |  |
|---------------------|--|--------------------------|----------------------------|---------------------------|--|
| Debtor 1            | Ewa Czochara   |                          |                            |                           |  |
|                     | First Name   | Middle Name              | Last Name                  |                           |  |
| Debtor 2            |  |                          |                            |                           |  |
| (Spouse if, filing) | First Name   | Middle Name              | Last Name                  |                           |  |
| United States B     | Bankruptcy Court for the:                            | NORTHERN DISTRICT        | OF ILLINOIS                |                           |  |
| Case number         |  |                          |                            |                           |  |
| (if known)          |  |                          |                            |                           | ☐ Check if this is an  |
|                     |  |                          |                            |                           | amended filing   |
|                     |  |                          |                            |                           |  |
| Official For        | m 106Dec   |                          |                            |                           |  |
|                     |  | ın Individual            | Debtor's Sc                | hadulas                   | 40/45  |
| Declara             | tion About a   | iii iiiuiviuuai          | Depiol 3 30                | ileuules                  | 12/15  |
| You must file the   | his form whenever you f<br>ey or property by fraud i | n connection with a bank | or amended schedules       | . Making a false stateme  | ent, concealing property, or<br>or imprisonment for up to 20 |
| years, or both.     | 18 U.S.C. §§ 152, 1341, 1                            | 519, and 3571.           |                            |                           |  |
| Sid                 | gn Below   |                          |                            |                           |  |
| O.                  | gii below  |                          |                            |                           |  |
| Did you p           | ay or agree to pay some                              | one who is NOT an attor  | ney to help you fill out b | pankruptcy forms?         |  |
| ■ No                |  |                          |                            |                           |  |
| ☐ Yes.              | Name of person                                       |                          |                            | Attach Bankrup            | otcy Petition Preparer's Notice,                             |
| _                   | ·  |                          |                            | Declaration, an           | od Signature (Official Form 119)                             |
|                     |  |                          |                            |                           |  |
|                     | nalty of perjury, I declare                          | that I have read the sum | mary and schedules file    | d with this declaration a | nd   |
| <b>ν</b> /ο/ Γυ     | va Czochara  |                          | X                          |                           |  |
|                     | va Ozochara<br>Czochara                              |                          | A<br>Signature of          | Debtor 2                  |  |
|                     | cure of Debtor 1                                     |                          | Signature of               | DODIOI Z                  |  |

Date \_\_\_\_\_

Date January 30, 2017

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| Fil               | I in this inforr                    | nation to identify you                        | r case:  |   |   |   |
|-------------------|-------------------------------------|---|--|---|---|---|
| De                | ebtor 1                             | Ewa Czochara                                  |  |   |   |   |
|                   | h. ( 0                              | First Name                                    | Middle Name  | Last Name   |   |   |
| 1                 | ebtor 2<br>ouse if, filing)         | First Name                                    | Middle Name  | Last Name   |   |   |
| Lin               | sited States Po                     | plantay Court for the                         | NORTHERN DISTRICT C  | NE ILLINOIS   |   |   |
| Un                | illed States ba                     | nkruptcy Court for the:                       | NORTHERN DISTRICT C  | OF ILLINOIS   |   |   |
| 1                 | se number _                         |   |  |   |   |   |
| (if k             | (nown)                              |   |  |   | -   | Check if this is an                                   |
|                   |                                     |   |  |   | a   | mended filing   |
| _                 |                                     |   |  |   |   |   |
| <u>O</u> 1        | fficial Fo                          | <u>rm 107</u>                                 |  |   |   |   |
| St                | atement                             | of Financial                                  | Affairs for Individ  | luals Filing for E                                    | Bankruptcy  | 4/10  |
| info              | ormation. If m                      | nore space is needed,<br>n). Answer every que | attach a separate sheet to t<br>stion.   | this form. On the top of an                           | equally responsible for sup<br>y additional pages, write you      |   |
| Pa                | rt 1: Give I                        | Details About Your Ma                         | arital Status and Where You  | Lived Before  |   |   |
| 1.                | What is you                         | r current marital statu                       | ıs?  |   |   |   |
|                   | <b>=</b>                            |   |  |   |   |   |
|                   | ■ Married □ Not ma                  |   |  |   |   |   |
|                   | - Not mai                           | mea   |  |   |   |   |
| 2.                | During the I                        | ast 3 years, have you                         | lived anywhere other than v  | where you live now?                                   |   |   |
|                   | ■ No                                |   |  |   |   |   |
|                   | _                                   | st all of the places you l                    | ived in the last 3 years. Do no  | ot include where you live now                         | N.  |   |
|                   | Dobton 4 Do                         | stan Automaan                                 | Datas Dahtan 1   | Dahtan O Daian A                                      | ddaaaa  | Datas Dahtan 2  |
|                   | Debtor 1 Pi                         | rior Address:                                 | Dates Debtor 1 lived there   | Debtor 2 Prior A                                      | ddress:   | Dates Debtor 2 lived there                            |
| <b>3.</b><br>stat | tes and territor                    | <i>ies</i> include Arizona, Ca                |  | vada, New Mexico, Puerto R                            | nity property state or territory<br>tico, Texas, Washington and W |   |
| Do                | w 2 Evelo                           | in the Courses of Vou                         | w Income   |   |   |   |
| Pa                | ert 2 Explai                        | in the Sources of You                         | r income   |   |   |   |
| 4.                | Fill in the total f you are filing. | al amount of income yo                        | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | ill businesses, including part                        |   | ndar years?   |
|                   |                                     |   | Debtor 1   |   | Debtor 2  |   |
|                   |                                     |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                        | Gross income<br>(before deductions<br>and exclusions) |
|                   |                                     | of current year untiled for bankruptcy:       | ☐ Wages, commissions, bonuses, tips  | \$0.00  | ☐ Wages, commissions, bonuses, tips                               | ,   |
|                   |                                     |   | ☐ Operating a business   |   | ☐ Operating a business  |   |
|                   |                                     |   | , ,  |   | , ,   |   |
|                   | r last calenda                      |   | ☐ Wages, commissions,  | \$0.00  | ☐ Wages, commissions,   |   |
| (Ja               | anuary 1 to De                      | ecember 31, 2016 )                            | bonuses, tips  |   | bonuses, tips   |   |
|                   |                                     |   | ☐ Operating a business   |   | ☐ Operating a business  |   |
| Offic             | cial Form 107                       |   | Statement of Financial Affa  | airs for Individuals Filing for E                     | Bankruptcy  | page  |

Page 31 of 50 Case number (if known) Document Debtor 1 Ewa Czochara **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$0.00 ☐ Wages, commissions, □ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income **Gross income from** Sources of income Gross income Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. □ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations

of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

**Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid

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| Yes. List all payments to an insider   Insider's Name and Address   Dates of payment   Total amount paid   Amount you still owe   Reason for this Include creditor  | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.  No |  |  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|--|
| Part 4: Identify Legal Actions, Repossessions, and Foreclosures  9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding. List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Nature of the case Court or agency Status of the case Check all that apply and fill in the details below.  No. Go to line 11. Yes. Fill in the information below.  Creditor Name and Address Describe the Property Explain what happened  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amoacounts or refuse to make a payment because you owed a debt? |   |  |  |  |  |  |  |  |  |
| 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Nature of the case Court or agency Status of the contract all that apply and fill in the details below.  No. Go to line 11. Yes. Fill in the information below.  Creditor Name and Address Describe the Property Explain what happened  Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any among accounts or refuse to make a payment because you owed a debt?   |   |  |  |  |  |  |  |  |  |
| 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Nature of the case Court or agency Status of the contract all that apply and fill in the details below.  No. Go to line 11. Yes. Fill in the information below.  Creditor Name and Address Describe the Property Explain what happened  Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any among accounts or refuse to make a payment because you owed a debt?   |   |  |  |  |  |  |  |  |  |
| List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Nature of the case Court or agency Status of the contract disputes.  Nature of the case Court or agency Status of the contract disputes.  No. Go to line 11. Yes. Fill in the information below.  Creditor Name and Address Describe the Property Explain what happened  No. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any among accounts or refuse to make a payment because you owed a debt?  |   |  |  |  |  |  |  |  |  |
| Yes. Fill in the details.  Case title Case number  Nature of the case Court or agency Status of the case number  10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, so Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address Describe the Property Explain what happened  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any among accounts or refuse to make a payment because you owed a debt?   | List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.                                 |  |  |  |  |  |  |  |  |
| Case number  10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, s Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address  Describe the Property  Explain what happened  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amo accounts or refuse to make a payment because you owed a debt?  |   |  |  |  |  |  |  |  |  |
| Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address  Describe the Property  Explain what happened  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amo accounts or refuse to make a payment because you owed a debt?   | ase   |  |  |  |  |  |  |  |  |
| ☐ Yes. Fill in the information below.  Creditor Name and Address  Describe the Property  Explain what happened  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amo accounts or refuse to make a payment because you owed a debt?  | eized, or levied?   |  |  |  |  |  |  |  |  |
| Explain what happened  11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amo accounts or refuse to make a payment because you owed a debt?   |   |  |  |  |  |  |  |  |  |
| 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amo accounts or refuse to make a payment because you owed a debt?  | Value of the  |  |  |  |  |  |  |  |  |
| accounts or refuse to make a payment because you owed a debt?   | property  |  |  |  |  |  |  |  |  |
| ☐ Yes. Fill in the details.   | ounts from your   |  |  |  |  |  |  |  |  |
| Creditor Name and Address  Describe the action the creditor took  Date action was taken   | Amount  |  |  |  |  |  |  |  |  |
| <ul> <li>12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit court-appointed receiver, a custodian, or another official?</li> <li>■ No</li> <li>□ Yes</li> </ul>   | of creditors, a   |  |  |  |  |  |  |  |  |
| Part 5: List Certain Gifts and Contributions  |   |  |  |  |  |  |  |  |  |
| <ul> <li>Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?</li> <li>No</li> <li>□ Yes. Fill in the details for each gift.</li> </ul>   |   |  |  |  |  |  |  |  |  |
| Gifts with a total value of more than \$600 Describe the gifts  Dates you gave the gifts  | Value   |  |  |  |  |  |  |  |  |
| Person to Whom You Gave the Gift and Address:   |   |  |  |  |  |  |  |  |  |
| <ul> <li>14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$60</li> <li>■ No</li> <li>□ Yes. Fill in the details for each gift or contribution.</li> </ul>   | 00 to any charity?  |  |  |  |  |  |  |  |  |
| Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)  | Value   |  |  |  |  |  |  |  |  |
| Part 6: List Certain Losses   |   |  |  |  |  |  |  |  |  |

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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| Del | otor 1 Ewa Czochara  |                      | ocument                                  | Page 33 of 5  |                |   | · IVIAIII                 |
|-----|--|----------------------|--|---|----------------|---|---------------------------|
|     | or gambling?   |                      |  |   |                |   |                           |
|     | ■ No □ Yes. Fill in the details.  Describe the property you lost and how the loss occurred   | Include th           | he amount that ins                       | overage for the los<br>urance has paid. Lis<br>of Schedule A/B: F | st pending     | Date of your loss                             | Value of property<br>lost |
| Par | t 7: List Certain Payments or Transfers  | 5                    |  |   |                |   |                           |
| 16. | Within 1 year before you filed for bankru consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition position.  No  Yes. Fill in the details.   | oreparing            | a bankruptcy pe                          | tition?   |                |   | rty to anyone you         |
|     | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y   | 1                    | Description and transferred              | value of any prope  | rty            | Date payment or transfer was made             | Amount of payment         |
|     | Worwag & Malysz, P.C.<br>The Peoples Advocates<br>2500 E. Devon Ave #300<br>Des Plaines, IL 60018  |                      | Fee \$900, \$450                         | ) paid.   |                | 2015  | \$900.00                  |
| 17. | Within 1 year before you filed for bankrupromised to help you deal with your cred Do not include any payment or transfer that  No Yes. Fill in the details.  | ditors or t          | o make payment                           |   |                | r transfer any prope                          | rty to anyone who         |
|     | Person Who Was Paid<br>Address   |                      | Description and transferred              | value of any prope  | rty            | Date payment<br>or transfer was<br>made       | Amount of payment         |
| 18. | Within 2 years before you filed for bankri transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have already No  Yes. Fill in the details. | r busines<br>made as | ss or financial aff<br>security (such as | airs?<br>the granting of a sec                                    |                |   |                           |
|     | Person Who Received Transfer<br>Address<br>Person's relationship to you  |                      | Description and property transfer        |   |                | ny property or<br>received or debts<br>change | Date transfer was made    |
| 19. | Within 10 years before you filed for bank beneficiary? (These are often called asset ■ No □ Yes. Fill in the details.  |                      |  | ny property to a se   | lf-settled tru | st or similar device                          | of which you are a        |

Name of trust

Description and value of the property transferred

**Date Transfer was** 

made

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Debtor 1 Ewa Czochara

| Pa  | rt 8: List of Certain Financial Accounts, In   | nstruments, Safe Deposi                                       | t Boxes, and S                 | torage Un  | its  |   |  |  |  |
|-----|--|---|--------------------------------|------------|--|---|--|--|--|
|     | Within 1 year before you filed for bankruptor sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso  | or other financial accou                                      | nts; certificate               | s of depos | •  |   |  |  |  |
|     | ■ No   |   |                                |            |  |   |  |  |  |
|     | Yes. Fill in the details.  |   |                                |            |  |   |  |  |  |
|     | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)   | Last 4 digits of account number                               | Type of acco                   | ount or    | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |  |  |  |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?                                   |   |                                |            |  |   |  |  |  |
|     | No   |   |                                |            |  |   |  |  |  |
|     | Yes. Fill in the details.  |   |                                |            |  |   |  |  |  |
|     | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code) |                                | Describe   | e the contents                                       | Do you still have it?                         |  |  |  |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  No Yes. Fill in the details.  |   |                                |            |  |   |  |  |  |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)   | to it?  | Address (Number, Street, City, |            |  | Do you still have it?                         |  |  |  |
| Pa  | rt 9: Identify Property You Hold or Contro   | I for Someone Else  |                                |            |  |   |  |  |  |
| 23. | Do you hold or control any property that so for someone.   | omeone else owns? Incl  | ude any prope                  | rty you bo | rrowed from, are storing                             | for, or hold in trust                         |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |                                |            |  |   |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the prop<br>(Number, Street, City, S<br>Code)        |                                | Describe   | e the property                                       | Value   |  |  |  |
| Pa  | rt 10: Give Details About Environmental Inf  | formation   |                                |            |  |   |  |  |  |
| For | the purpose of Part 10, the following definit  | ions apply:   |                                |            |  |   |  |  |  |
|     | Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of thes  | the air, land, soil, surfac                                   | e water, groun                 |            |  |   |  |  |  |
|     | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. |   |                                |            |  |   |  |  |  |
|     | Hazardous material means anything an enhazardous material, pollutant, contaminant  | vironmental law defines                                       | as a hazardous                 | s waste, h | azardous substance, tox                              | cic substance,                                |  |  |  |
| Rep | port all notices, releases, and proceedings th   | nat you know about, rega                                      | ardless of whe                 | n they occ | curred.  |   |  |  |  |
| 24. | Has any governmental unit notified you that  | at you may be liable or p                                     | otentially liable              | under or   | in violation of an enviro                            | nmental law?                                  |  |  |  |
|     | No No  |   |                                |            |  |   |  |  |  |
|     | ☐ Yes. Fill in the details.  |   |                                |            |  |   |  |  |  |

Name of site

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Date of notice

Environmental law, if you

know it

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| 25   | Нам  | re you notified any governmental unit o  | f any release of hazardous material?  |                                 |  |  |  |  |  |  |  |
|--|--|--|---|---------------------------------|--|--|--|--|--|--|--|
| LJ.  | ııav<br>■  |  | any release of flazardous fliaterial:   |                                 |  |  |  |  |  |  |  |
|  |  | No<br>Yes. Fill in the details.  |   |                                 |  |  |  |  |  |  |  |
|  |  | me of site<br>dress (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State and ZIP Code)  | Environmental law, if y know it | ou Date of notice  |  |  |  |  |  |  |
| 26.  | Hav  | e you been a party in any judicial or ad   | ministrative proceeding under any envir   | onmental law? Include set       | tlements and orders.   |  |  |  |  |  |  |
|  | _  | No   |   |                                 |  |  |  |  |  |  |  |
|  |  | Yes. Fill in the details.  |   |                                 |  |  |  |  |  |  |  |
|  |  | se Title<br>se Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Nature of the case              | Status of the case   |  |  |  |  |  |  |
| Par  | t 11:  | Give Details About Your Business or  | r Connections to Any Business   |                                 |  |  |  |  |  |  |  |
| 27.  | Witl   | hin 4 vears before vou filed for bankrup   | otcy, did you own a business or have an   | of the following connecti       | ons to any business?   |  |  |  |  |  |  |
|  |  |  | in a trade, profession, or other activity,  | •                               | •  |  |  |  |  |  |  |
|  |  | _  | pany (LLC) or limited liability partnershi  | •                               |  |  |  |  |  |  |  |
|  |  | ☐ A partner in a partnership   | , (, (,,,,,,,   | (,                              |  |  |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |  |  |
|  |  | An officer, director, or managing executive of a corporation   |   |                                 |  |  |  |  |  |  |  |
|  | _  | ☐ An owner of at least 5% of the voting or equity securities of a corporation                                    |   |                                 |  |  |  |  |  |  |  |
|  | _  | No. None of the above applies. Go to Part 12.  |   |                                 |  |  |  |  |  |  |  |
|  | Yes. Check all that apply above and fill in the details below for each business. |  |   |                                 |  |  |  |  |  |  |  |
|  |  | siness Name<br>dress   | Describe the nature of the business   |                                 | er Identification number<br>nclude Social Security number or ITIN. |  |  |  |  |  |  |
|  | (Nui   | mber, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper  | ed                              |  |  |  |  |  |  |  |
| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fir institutions, creditors, or other parties. |  |  |   |                                 |  |  |  |  |  |  |  |
|  |  | No   |   |                                 |  |  |  |  |  |  |  |
|  |  | Yes. Fill in the details below.  |   |                                 |  |  |  |  |  |  |  |
|  | Na   | me<br>dress  | Date Issued   |                                 |  |  |  |  |  |  |  |
|  |  | mber, Street, City, State and ZIP Code)  |   |                                 |  |  |  |  |  |  |  |
| Par  | t 12:  | Sign Below   |   |                                 |  |  |  |  |  |  |  |
| are t<br>with<br>18 U  | true<br>a ba<br>J.S.C  | and correct. I understand that making a ankruptcy case can result in fines up to . §§ 152, 1341, 1519, and 3571. | inancial Affairs and any attachments, and a false statement, concealing property, cos \$250,000, or imprisonment for up to 20 | r obtaining money or prop       |  |  |  |  |  |  |  |
| _  |  | Czochara   | Signature of Debtor 2   |                                 |  |  |  |  |  |  |  |
|  |  | zochara<br>re of Debtor 1  | orginatare or positor 2   |                                 |  |  |  |  |  |  |  |
| Dat  | :е _   | January 30, 2017   | Date  |                                 |  |  |  |  |  |  |  |
| Did  | you  | attach additional pages to Your Statem   | nent of Financial Affairs for Individuals F   | iling for Bankruptcy (Offici    | al Form 107)?  |  |  |  |  |  |  |
| <b>N</b>   | lo   |  |   |                                 |  |  |  |  |  |  |  |
| ΠY   | 'es  |  |   |                                 |  |  |  |  |  |  |  |
| Did :  | -  | pay or agree to pay someone who is no  | ot an attorney to help you fill out bankru  | otcy forms?                     |  |  |  |  |  |  |  |
| _  |  | Name of Person Attach the Bankr  | uptcy Petition Preparer's Notice, Declaratio  | n, and Signature (Official Fo   | rm 119).   |  |  |  |  |  |  |
|  |  |  | ment of Financial Affairs for Individuals Filing  | • •                             | page 6   |  |  |  |  |  |  |

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Debtor 1 Ewa Czochara

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|           |         |        | k if this is an |
|-----------|---------|--------|-----------------|
|           |         | amer   | nded filing     |
| Chapt     | der Cha | oter 7 | 12/15           |
| <u>Ch</u> | der Ch  | ap     | apter 7         |

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt?  | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.    | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                             |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                             |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.    | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                             |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                             |   |
| Description of  | Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                             |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1                               | Ewa Czochara   | Case number (if known)   |                                   |
|--|--|--|-----------------------------------|
| name:                                  | ation of   | <ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a</li></ul>  | ☐ Yes                             |
| Descrip<br>propert<br>securin          |  | Reaffirmation Agreement.  Retain the property and [explain]:   | _                                 |
| For any u                              | ormation below. Do not list real estate leas   | eases<br>listed in Schedule G: Executory Contracts and Unexpire<br>es. Unexpired leases are leases that are still in effect; th<br>ease if the trustee does not assume it. 11 U.S.C. § 365(p)( | e lease period has not yet ended. |
| Describe                               | your unexpired personal property leases  |  | Will the lease be assumed?        |
| Lessor's r<br>Description<br>Property: | on of leased   |  | □ No □ Yes                        |
| Lessor's r<br>Description<br>Property: | on of leased   |  | □ No □ Yes                        |
| Lessor's r<br>Description<br>Property: | on of leased   |  | □ No □ Yes                        |
| Lessor's r<br>Description<br>Property: | on of leased   |  | □ No □ Yes                        |
| Lessor's r<br>Description<br>Property: | on of leased   |  | □ No □ Yes                        |
| Lessor's r<br>Description<br>Property: | on of leased   |  | □ No □ Yes                        |
| Lessor's r<br>Description<br>Property: | on of leased   |  | □ No                              |
| . ,                                    | Sign Below   |  | ☐ Yes                             |
|  | nalty of perjury, I declare that I have indica<br>that is subject to an unexpired lease. | ted my intention about any property of my estate that se   | cures a debt and any personal     |
|  | Ewa Czochara   | X  |                                   |
|  | a Czochara<br>ature of Debtor 1  | Signature of Debtor 2  |                                   |
| Date                                   | January 30, 2017   | Date   |                                   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-02794 Doc 1 Filed 01/31/17 Entered 01/31/17 16:08:19 Desc Main Document Page 43 of 50

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

| In re | Ewa Czochara   |   | Case No.  |  |    |
|-------|--|---|---|--|----|
|       |  | Debtor(s)   | Chapter   | 7  | _  |
|       | DISCLOSURE OF COMP   | ENSATION OF ATTOR   | NEY FOR DI  | EBTOR(S)   |    |
|       | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the f be rendered on behalf of the debtor(s) in contemplation  | iling of the petition in bankruptcy, o  | r agreed to be paid                                       | to me, for services rendered or to               |    |
|       | For legal services, I have agreed to accept  |   | \$  | 900.00   |    |
|       | Prior to the filing of this statement I have received  | ed  | \$  | 450.00   |    |
|       | Balance Due  |   | \$  | 450.00   |    |
| 2.    | The source of the compensation paid to me was:   |   |   |  |    |
|       | ■ Debtor □ Other (specify):  |   |   |  |    |
| 3. ′  | The source of compensation to be paid to me is:  |   |   |  |    |
|       | ■ Debtor □ Other (specify):  |   |   |  |    |
| 4.    | ■ I have not agreed to share the above-disclosed co  | mpensation with any other person ur   | nless they are mem  | bers and associates of my law firm               | n. |
|       | ☐ I have agreed to share the above-disclosed competopy of the agreement, together with a list of the   |   |   |  |    |
| 5.    | In return for the above-disclosed fee, I have agreed to  | o render legal service for all aspects  | of the bankruptcy of                                      | ease, including:                                 |    |
| 1     | <ul> <li>a. Analysis of the debtor's financial situation, and reib. Preparation and filing of any petition, schedules, sc. Representation of the debtor at the meeting of credd. [Other provisions as needed] Negotiations with secured creditors to reagreements and applications as needed of liens on household goods.</li> </ul> | statement of affairs and plan which n<br>ditors and confirmation hearing, and<br>educe to market value; exemption | nay be required;<br>any adjourned hea<br>planning; prepar | rings thereof; ation and filing of reaffirmation |    |
| 6.    | By agreement with the debtor(s), the above-disclosed Representation of the debtors in any dis adversary proceeding.  |   |   | ef from stay actions or any other                | ۶r |
|       |  | CERTIFICATION   |   |  |    |
|       | I certify that the foregoing is a complete statement of pankruptcy proceeding.   | any agreement or arrangement for p  | ayment to me for r  | epresentation of the debtor(s) in                |    |
| J     | anuary 30, 2017  | /s/ Michael J. Worwa  | aq  |  |    |
| _     | Date   | Michael J. Worwag   | <u> </u>  |  |    |
|       |  | Signature of Attorney<br>Worwag & Malysz, F   | P C   |  |    |
|       |  | The Peoples Advoca  |   |  |    |
|       |  | 2500 E. Devon Ave   |   |  |    |
|       |  | Des Plaines, IL 600°<br>847.954.2350 Fax:   |   |  |    |
|       |  | _mjworwag@gmail.co  |   |  |    |
|       |  | Name of law firm  |   |  |    |

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### WORWAG & MALYSZ, P.C.

adba The Peoples Advocates
www.worwaqmalyszlaw.com

2500 E. Devon Ave #300 Des Plaines, Illinois 60018 Phone: 847.533.3303 Email: mjworwag@gmail.com 10135 S. Roberts Rd. #205 Palos Hill, Illinois 60465 Phone: 773.586.4010 Fax:847.954.2755

### **Retainer for Legal Services**

page used debts. Cortain debts may not be dischargeable

Chapter 7- Eliminates dischargeable unsecured debts. Certain debts may not be dischargeable. +\$70.00 cc

Your fee for our services is \$ 900 . This is a "flat fee" of which half is for services rendered prior to your case being filed and the other half is for services rendered after your case is filed. Any portion of the retainer not earned will be refunded to you.

Today you paid \$ \( \frac{\sqrt{\sq}}}}}}}}}}} \sqrt{\sq}}}}}}}}}}}} \sqirat{\signat}\sqrt{\sint{\sint{\sint{\sint{\sint{\sint{\sin{

This agreement will serve as an engagement agreement that will establish the terms of our relationship. When you sign it, it will become a contract between us. In passing the Bankruptcy Abuse Prevention and Consumer Protection Act of 2005, the Congress imposed strict requirements upon attorneys representing debtors, requiring them to specify what duties they will perform and to make certain representations to clients. Those specific duties and representations are set out in the representation agreement. Please read this agreement carefully and be sure you understand it. If you have any questions, you should consult with me before signing. Once you are satisfied with the agreement, please sign and return a copy to me. The following are the specifics of our proposed representation. We will:

- Meet with you to discuss your financial situation and possible solutions;
- 2. Provide the section 342(b)(1) notice, which sets out the purpose, benefits, and costs of filing under Chapters 7, 11, 12 or 13; the types of services available from credit counseling agencies; and the penalties of committing certain bankruptcy crimes, and will explain the notice to you;
- 3. Prepare the necessary bankruptcy petition, schedules, statement of affairs, and other documents, and review and file the bankruptcy case under the chapter you select;
- 4. Prepare for and accompany you to the section 341 first meeting of creditors;
- 5. Assist in the amendments to the papers filed and the production of such documents as the trustee requests;
- 6. Assist you in the negotiation and execution of reaffirmation agreements that are in your best interest and meet all requirements of the law.

FULL DISCLOSURE- You agree that you will fully disclose all financial information. You agree to disclose ALL of your assets, debts and income and understand that it is a Federal crime to omit any other information from your bankruptcy petition punishable by fine of up to \$500,000 or imprisonment for up to 5 years or both. You also agree to provide our office with proof of your income for the last six months and your tax returns for the previous two (2) years.

→FINANACIAL MANANGEMENT AND CREDIT COUNSELING COURSES- Under the new law you are required to take a Credit Counseling Course prior to the filing of your bankruptcy petition and a Financial Management Course prior to the discharge of your bankruptcy for an

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ADDITITONAL FEE (usually no more than \$100). If you fail to complete these courses your bankruptcy will be denied.

Attached are notices and information I am required to give you by law. Please read all information.

### **Debt Relief Agency Disclosures to an Assisted Person**

Section 527 of the Bankruptcy Code requires a Debt Relief Agency to provide an assisted person with the following:

- 1. A copy of the notice prepared by the clerk of the Bankruptcy Court, in accordance with the requirements of § 342(b), which is attached hereto and which contains:
  - (1) a brief description of
    - (A) Chapters 7, 11, 12, and 13 and the general purpose, benefits, and costs of proceeding under each of those chapters; and
    - (B) the types of services available from credit counseling agencies; and
  - (2) statements specifying that
    - (A) a person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury in connection with a case under this title shall be subject to fine, imprisonment, or both; and
    - (B) all information supplied by a debtor in connection with a case under this title is subject to examination by the Attorney General.
- 2. The following disclosures are required by § 527(a)(2), which advises an assisted person that:
  - (A) all information that the assisted person is required to provide with a petition and thereafter during a case under this title is required to be complete, accurate, and truthful;
  - (B) all assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset as defined in § 506 must be stated in those documents where requested after reasonable inquiry to establish such value;
  - (C) current monthly income, the amounts specified in section 707(b)(2), and, in a case under Chapter 13 of this title, disposable income (determined in accordance with § 707(b)(2)) are required to be stated after reasonable inquiry; and
  - (D) information that an assisted person provides during his or her case may be audited pursuant to this title, and failure to provide such information may result in dismissal of the case under this title or other sanction, including a criminal sanction.

If you have any questions about any of these disclosures, we will be happy to provide further explanation.

We also call your attention to Exhibits A and B attached to the Representation and made a part thereof.

#### **EXHIBIT A**

### Separate Disclosure Required by Section 527 of the Bankruptcy Code as Amended

### IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY

(Note: This form is mandated by statute. It may or may not correctly explain the law.)

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. The law requires an attorney or bankruptcy petition preparer to give you a written contract specifying what the attorney or bankruptcy petition preparer will do for you and how much it will cost. Ask to see the contract before you hire anyone.

The following information explains what must be done in a routine bankruptcy case to help you evaluate how much service you need. Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and decide which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents (Petition, Schedules, Statement of Financial Affairs, and in some cases a Statement of Intention) must be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you must attend the required first meeting of creditors, where you may be questioned by a court official called a "trustee" and by creditors.

If you choose to file a Chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a Chapter 13 case, in which you repay your creditors what you can afford over 3 to 5 years, you may also want help preparing your Chapter 13 plan and with the confirmation hearing on your plan, which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than Chapter 7 or Chapter 13, you should consult someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only lawyers, not bankruptcy petition preparers, can give you legal advice.

Client hereby acknowledges receipt of a copy of this disclosure.

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#### **EXHIBIT B**

# Information to the Assisted Person (Debtor) on How to Provide All Information Required by Section 521

Section 521 of the Code sets out the Debtor's duties related to the filing of a bankruptcy case. A copy of the section is attached to this writing.

As you fill out these schedules and statement of affairs, you should keep the following in mind:

- Completing the income and expense pages accurately and completely is critical.
  - (a) To compile your income, refer to recent pay stubs and last year's income tax returns. Accounting for overtime, investment dividends, and other earnings is necessary.
  - (b) People usually pay cash for many items, such as groceries. Review your monthly expense payments and make a best estimate on cash expenditures. If you pay insurance annually, calculate the monthly cost. Attached are IRS expense allowances for the area in which you live. If your expenses exceed these, we will have to review them and perhaps make adjustments.
  - (c) When you value property you own, consider prices in the neighborhood for housing, in newspapers and car lots for automobiles, and what you would pay for furniture and clothes at a business selling such goods.
  - (d) If you have an item of special value, an appraisal may be necessary.
  - (e) When listing creditors, collect current bills and use that information for mailing addresses and balances due.
  - (f) Under the law of this state, or federal bankruptcy law, certain property may be exempt and may be retained. Attached is a copy of the state list of exemptions and also a list of property that may be exempt under federal law. Neither list is all-inclusive. If a seller has a lien on exempt property, the lien may be avoidable or you may have to pay for the property in order to keep it. After you have prepared these lists, we can review them and decide what property qualifies as exempt.

ADDITIONAL FEES- The *only* reason that you may be charged additional fees is a) *Failing to list debts* at time of filing that later have to be added to your bankruptcy documents. There is a \$100 charge to amend your petition, b) *Missing court date*. You must attend a meeting of creditors approximately 4 - 6 weeks after your case is filed. I still have to appear if you cannot, so there will be a \$150 additional fee for a missed court date. c) *Adversary objections* to discharge debts based on fraudulent use of credit cards or other dischargeability issues. Fee for litigating a dischargeability issue is \$200 per hour, five hours to be paid in advance if we decide to represent you. d) *Lien avoidance*. You agree that the above quoted fee does not include services provided to avoid judgment liens (\$200 per hour) and non-purchase money security interests (\$200 per hour). You understand and agree that if you do not pay the fee, I will not bring the motion and the lien will survive the bankruptcy. **Reaffirmations**- Once you reaffim a debt, you may only rescind the reaffirmation agreement by contacting our office no less than two weeks prior

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to the bar date for rescissions. You may only reaffirm a debt if it does not impose an undue hardship to you.

| Secured Debts   | Unsecured Debts                                    | Non-Dischargeable                               |
|---|--|---|
| Mortgage Arrears  |  | Tax   |
| Mortgage Balance  |  | Student Loans                                   |
| Car Balance   |  | Gov't Fines                                     |
| Loans   |  | Misc  |
| Total Secured \$  | Total Unsecured                                    | Total Non-Disc \$                               |
| What you must provide befo  | ore I file your case: (I can                       | not file without this information!)             |
|   | me tax returns for the prior 2 year                |   |
|   |  | concerning your earnings for the past 6 months  |
| <ul> <li>All bills from all creditors for</li> </ul>                | or the past 90 days so that we m                   | ay determine the proper place to send notice.   |
| All loan documents for all s  | secured loans, including home loa                  | ins and auto loans                              |
| <ul> <li>Your social security card</li> </ul>                       |  |   |
| <ul> <li>Your photo identification ca</li> </ul>                    | ard  |   |
| <ul> <li>List of your household income</li> </ul>                   | ome and expenses                                   |   |
| <ul> <li>Details concerning every it</li> </ul>                     | em of property you own, includir                   | g real estate and personal property             |
| <ul> <li>Details concerning any litig</li> </ul>                    | gation in which you involved now                   | or in which you may be involved in the future.  |
| <ul> <li>Information on any inherit may be a beneficiary</li> </ul> | ance you may have received, ex                     | pect to receive or trust as to which you are or |
| • Information on all insuran  | ce policies  |   |
| Credit Counseling C   | ertificate   |   |
| I hereby acknowledge that I/V agreement and I/we understa           | We have read and reviewed and all of its contents. | this 5 page retainer/representation             |
| x Cochemia  | 1/24/1> X  |   |
| Client Da   | C  | lient Date                                      |

Attorney on behalf of Worwag & Marysz, PC

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### United States Bankruptcy Court Northern District of Illinois

| In re | Ewa Czochara                                 |                                      | Case No.                       |               |
|-------|--|--------------------------------------|--------------------------------|---------------|
|       |  | Debtor(s)                            | Chapter 7                      |               |
|       |  |                                      |                                |               |
|       | VER  | IFICATION OF CREDITOR                | MATRIX                         |               |
|       |  | Number o                             | f Creditors:                   | 9             |
|       | The above-named Debtor(s) h (our) knowledge. | ereby verifies that the list of cred | itors is true and correct to t | he best of my |
| Date: | January 30, 2017                             | /s/ Ewa Czochara<br>Ewa Czochara     |                                |               |

Capital One Bank Usa 15000 Capital One Dr Richmond, VA 23238

Citibank Po Box 6241 Sioux Falls, SD 57117

Citibank na 50 Northwest Point Road Elk Grove Village, IL 60007

Credit One Bank Na Po Box 98875 Las Vegas, NV 89193

Kohls/Capital One N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Macy dsnb 9111 Duke Blvd Mason, OH 45040

Nordstrom Fsb Po Box 6555 Englewood, CO 80155

Syncb/Care Credit 950 Forrer Blvd Kettering, OH 45420

Syncb/Tj Maxx Po Box 965005 Orlando, FL 32896